| Case 16-15617 Doc 1 Fill in this information to identify your case: | Filed 05/06/16 | Entered 05/06/16 17:14:37 age 1 of 69 | Desc Main |
|---|---|--|------------------------------------|
| United States Bankruptcy Court for the: | | | |
| Northern District of: Illinois (State) | | | |
| Case number (if known) | Chapter you are filing under: Chapter 7 Chapter 11 Chapter 12 Chapter 13 | | Check if this is an amended filing |

Official Form 101

Voluntary Petition for Individuals Filing for Bankruptcy

12/15

The bankruptcy forms use *you* and *Debtor 1* to refer to a debtor filing alone. A married couple may file a bankruptcy case together—called a *joint case*—and in joint cases, these forms use *you* to ask for information from both debtors. For example, if a form asks, "Do you own a car, "the answer would be *yes* if either debtor owns a car. When information is needed about the spouses separately, the form uses *Debtor 1* and *Debtor 2* to distinguish between them. In joint cases, one of the spouses must report information as *Debtor 1* and the other as *Debtor 2*. The same person must be *Debtor 1* in all of the forms.

Be as complete and accurate as possible. If two married people are filing together, both are equally responsible for supplying correct information. If more space is needed, attach a separate sheet to this form. On the top of any additional pages, write your name and case number (if known). Answer every question.

| Part 1: Identify Yourself | | |
|---|----------------------------|---|
| | About Debtor 1: | About Debtor 2 (Spouse Only in a Joint Case): |
| 1. Your full name | Anthony First name | First name |
| Write the name that is on your government-issued picture identification (for example, your driver's | Middle name LaCour | Middle name |
| license or passport | Last name | Last name |
| Bring your picture identification to your meeting with the trustee. | Suffix (Sr., Jr., II, III) | Suffix (Sr., Jr., II, III) |
| 2. All other names you | | |
| have used in the last | First name | First name |
| 8 years | Middle name | Middle name |
| Include your married or | Middle Hame | Wildle Hame |
| maiden names. | Last name | Last name |
| | First name | First name |
| | Middle name | Middle name |
| | Last name | Last name |
| 3. Only the last 4 digits of your Social | XXX - XX- <u>3778</u> | xxx - xx- |
| Security number or | OR | OR |
| federal Individual Taxpayer Identification number (ITIN) | 9 xx - xx- | 9 xx - xx- |

Anthon Case 16-15617 Doc 1 Filed 05/06/16 Entered 05/06/16 /147/414:37 Desc Main Debtor 1 Page 2 of 69 Document Document **About Debtor 1:** About Debtor 2 (Spouse Only in a Joint Case): 4. Any business names I have not used any business names or EINs. I have not used any business names or EINs. and Employer Identification Business name Business name Numbers (EIN) you have used in the last 8 years Business name Business name Include trade names and EIN EIN doing business as names EIN EIN 5. Where you live If Debtor 2 lives at a different address: 2912 West 60th St Number Street Number Street 60629 Chicago Illinois City State Zip Code City State Zip Code Cook County County If your mailing address is different from the one above, fill If Debtor 2's mailing address is different from yours, fill it in it in here. Note that the court will send any notices to you at this here. Note that the court will send any notices to this mailing mailing address. address. Number Street Number Street City Zip Code State City State Zip Code 6. Why you are Check one: Check one: choosing this Over the last 180 days before filing this petition, I have lived district to file for Over the last 180 days before filing this petition, I have lived in this district longer than in any other district. in this district longer than in any other district. bankruptcy I have another reason. Explain. (See 28 U.S.C. §§ 1408.) I have another reason. Explain. (See 28 U.S.C. §§ 1408.)

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First Name Document Page 3 of 69

| The chapter of the Bankruptcy Code you are choosing to file under | Check one. (For a brief description of each, see Notice Required by 11 U.S.C. § 342(b) for Individuals Filing for Bankruptcy (Form B2010)). Also, go to the top of page 1 and check the appropriate box. Chapter 7 Chapter 11 Chapter 12 Chapter 13 | | | | | | |
|---|---|--------------------------------|--|--|--|--|--|
| 8. How you will pay the fee | I will pay the entire fee when I file my petition. Please check with the clerk's office in your court for more details about how you may pay. Typically, if you are paying the fee yourself, pay with cash, cashier's check, or money order If your attorney is submitting your payment behalf, your attorney may pay with a credit card or check with a pre-printed address. I need to pay the fee in installments. If you choose this option, sign and attach the Applicat Individuals to Pay Your Filing Fee in Installments (Official Form 103A). I request that my fee be waived (You may request this option only if you are filing for Chapter 150% of the official poverty line that applies to your family size and you are unable to pay the installments). If you choose this option, you must fill out the Application to Have the Chapter 1500 fee Waived (Official Form 103B) and file it with your petition. | | | | | | |
| 9. Have you filed for bankruptcy within the last 8 years? | ✓ No. ☐ Yes. District District District | When When When | MM / DD / YYYY MM / DD / YYYY MM / DD / YYYY | Case number Case number Case number | | | |
| 10. Are any bankruptcy cases pending or being filed by a spouse who is not filing this case with you, or by a business partner, or by an affiliate? | District Debtor District | When | MM / DD / YYYY MM / DD / YYYY | Relationship to you Case number, if known Relationship to you Case number, if known | | | |
| residence? | ✓ No. Go to line 12. ☐ Yes. Has your landlord obtained and line 12. ☐ No. Go to line 12. ☐ Yes. Fill out <i>Initial State</i> this bankruptcy preserved. | tement About an Eviction Judgn | • | | | | |

Anthon Case 16-15617 Doc 1 Filed 05/06/16 Entered 05/06/16 (14.73) 14:37 Desc Main Debtor 1 Page 4 of 69 Document of the Document of th Report About Any Businesses You Own as a Sole Proprietor 12. Are you a sole ◪ No. Go to Part 4. proprietor of any full- or part-time Name and location of business business? Name of business, if any A sole proprietorship is a business you operate as an Number Street individual, and is not a separate legal entity such as a corporation, partnership, or LLC. If you have more than City State Zip Code one sole proprietorship, use a Check the appropriate box to describe your business: separate sheet and Health Care Business (as defined in 11 U.S.C. § 101(27A)) attach it to this petition. Single Asset Real Estate (as defined in 11 U.S.C. § 101(51B)) Stockbroker (as defined in 11 U.S.C. § 101(53A)) Commodity Broker (as defined in 11 U.S.C. § 101(6)) None of the above 13. Are you filing under If you are filing under Chapter 11, the court must know whether you are a small business debtor so that it can set appropriate deadlines. Chapter 11 of the If you indicate that you are a small business debtor, you must attach your most recent balance sheet, statement of operations, cash-flow **Bankruptcy Code** statement, and federal income tax return or if any of these documents do not exist, follow the procedure in 11 U.S.C. § 11 16(1)(B). and are you a small business debtor? No. I am not filing under Chapter 11. For a definition of No. I am filing under Chapter 11, but I am NOT a small business debtor according to the definition in the small business debtor, Bankruptcy Code. see 11 U.S.C. § Yes. I am filing under Chapter 11 and I am a small business debtor according to the definition in the Bankruptcy Code. 101(51D). Part 4: Report if You Own or Have Any Hazardous Property or Any Property That Needs Immediate Attention 14. Do you own or have ◪ No. any property that poses or is alleged Yes. What is the hazard? to pose a threat of imminent and identifiable hazard to public health or If immediate attention is needed, why is it needed? safety? Or do you own any property that needs immediate attention? Where is the property? For example, do you Number Street own perishable goods, or livestock that must be fed, or a building that needs urgent repairs? City State Zip Code

Debtor 1 Anthon Case 16-15617
First Name Filed 05/06/16 Entered 05/06/16 (1/7):14:37 Desc Main Doc 1

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Part 5: Explain Your Efforts to Receive a Briefing About Credit Counseling

15. Tell t whet recei abou coun

The la you r about couns file fo You r checl follow you c you a file.

If you the co your lose fee y your begin activi

| | About Debtor 1: | | Ab | About Debtor 2 (Spouse Only in a Joint Case): | | |
|--|---|--|-----|--|---|--|
| he court | You must check one: | | You | You must check one: | | |
| her you have ived briefing it credit iseling. | counseling ager | fing from an approved credit cy within the 180 days before I filed this ion, and I received a certificate of | | counseling agenc | ng from an approved credit ry within the 180 days before I filed this on, and I received a certificate of | |
| aw requires that eceive a briefing | Attach a copy of the that you developed | ne certificate and the payment plan, if any, d with the agency. | | Attach a copy of the that you developed | e certificate and the payment plan, if any, with the agency. | |
| t credit seling before you or bankruptcy. must truthfully | counseling ager | briefing from an approved credit agency within the 180 days before I filed this petition, but I do not have a certificate of | | I received a briefing from an approved credit counseling agency within the 180 days before I filed this bankruptcy petition, but I do not have a certificate of completion. | | |
| k one of the ving choices. If cannot do so, | • | er you file this bankruptcy petition, opy of the certificate and payment | | • | r you file this bankruptcy petition, py of the certificate and payment | |
| are not eligible to u file anyway, ourt can dismiss | I certify that I asked for credit counseling services from an approved agency, but was unable to obtain those services during the 7 days after I made my request, and exigent circumstances merit a 30-day temporary waiver of the requirement. | | | an approved ager services during th | ed for credit counseling services from ncy, but was unable to obtain those ne 7 days after I made my request, and nces merit a 30-day temporary waiver nt. | |
| case, you will whatever filing ou paid, and creditors can collection | attach a separate obtain the briefing | y temporary waiver of the requirement, sheet explaining what efforts you made to why you were unable to obtain it before you y, and what exigent circumstances required e. | | attach a separate sl obtain the briefing, v | temporary waiver of the requirement, heet explaining what efforts you made to why you were unable to obtain it before you and what exigent circumstances required. | |
| ities again. | • | dismissed if the court is dissatisfied with not receiving a briefing before you filed for | | · · · · · · · · · · · · · · · · · · · | dismissed if the court is dissatisfied with ot receiving a briefing before you filed for | |
| | receive a briefing certificate from the | fied with your reasons, you must still within 30 days after you file. You must file a paproved agency, along with a copy of the developed, if any. If you do not do so, your issed. | | receive a briefing w certificate from the | ed with your reasons, you must still rithin 30 days after you file. You must file a approved agency, along with a copy of the eveloped, if any. If you do not do so, your seed. | |
| | • | he 30-day deadline is granted only for cause maximum of 15 days. | | Any extension of the and is limited to a m | e 30-day deadline is granted only for cause naximum of 15 days. | |
| | I am not require counseling beca | d to receive a briefing about credit use of: | | I am not required counseling becau | to receive a briefing about credit use of: | |
| | ☐ Incapacity. | I have a mental illness or a mental deficiency that makes me incapable of realizing or making rational decisions about finances. | | Incapacity. | I have a mental illness or a mental deficiency that makes me incapable of realizing or making rational decisions about finances. | |
| | ☐ Disability. | My physical disability causes me to be unable to participate in a briefing in person, by phone, or through the internet, even after I reasonably tried to do so. | | Disability. | My physical disability causes me to be unable to participate in a briefing in person, by phone, or through the internet, even after I reasonably tried to do so. | |
| | Active duty. | I am currently on active military duty in a military combat zone. | | Active duty. | I am currently on active military duty in a military combat zone. | |
| | | are not required to receive a briefing about you must file a motion for waiver of credit e court. | | | are not required to receive a briefing about rou must file a motion for waiver of credit e court. | |

Page 6 of 69 **Answer These Questions for Reporting Purposes** 16a. Are your debts primarily consumer debts? Consumer debts are defined in 11 U.S.C. § 101(8) 16. What kind of debts as "incurred by an individual primarily for a personal, family, or household purpose." do you have? No. Go to line 16b. Yes. Go to line 17. 16b. Are your debts primarily business debts? Business debts are debts that you incurred to obtain money for a business or investment or through the operation of the business or investment. No. Go to line 16c. Yes. Go to line 17. 16c. State the type of debts you owe that are not consumer debts or business debts. 17. Are you filing under No. I am not filing under Chapter 7. Go to line 18. Chapter 7? Do you estimate that Yes. I am filing under Chapter 7. Do you estimate that after any exempt property is excluded and administrative expenses are paid that funds will be available to distribute to unsecured creditors? after any exempt property is excluded No. and administrative Yes. expenses are paid that funds will be available for distribution to unsecured creditors? **√** 1-49 1,000-5,000 25,001-50,000 18. How many creditors 5,001-10,000 50,001-100,000 50-99 do you estimate that 10,001-25,000 More than 100,000 you owe? 100-199 200-999 **✓** \$0-\$50,000 \$1,000,001-\$10 million \$500,000,001-\$1 billion 19. How much do you \$50,001-\$100,000 \$10,000,001-\$50 million \$1,000,000,001-\$10 billion estimate your assets \$100,001-\$500,000 \$50,000,001-\$100 million \$10,000,000,001-\$50 billion to be worth? \$500,001-\$1 million \$100,000,001-\$500 million More than \$50 billion \$0-\$50,000 \$1,000,001-\$10 million \$500,000,001-\$1 billion 20. How much do you \$50,001-\$100,000 \$10,000,001-\$50 million \$1,000,000,001-\$10 billion estimate your \$100,001-\$500,000 \$50,000,001-\$100 million \$10,000,000,001-\$50 billion liabilities to be? \$500,001-\$1 million \$100,000,001-\$500 million More than \$50 billion Part 7: Sign Below I have examined this petition, and I declare under penalty of perjury that the information provided is true For you and correct. If I have chosen to file under Chapter 7, I am aware that I may proceed, if eligible, under Chapter 7, 11,12, or 13 of title 11, United States Code. I understand the relief available under each chapter, and I choose to proceed under Chapter 7. If no attorney represents me and I did not pay or agree to pay someone who is not an attorney to help me fill out this document, I have obtained and read the notice required by 11 U.S.C. § 342(b). I request relief in accordance with the chapter of title 11, United States Code, specified in this petition. I understand making a false statement, concealing property, or obtaining money or property by fraud in connection with a bankruptcy case can result in fines up to \$250,000, or imprisonment for up to 20 years, or both. 18 U.S.C. §§ 152, 1341, 1519, and 3571. x /s/ Anthony LaCour Signature of Debtor 2 Signature of Debtor 1 Executed on 5/6/2016 Executed on MM / DD / YYYY MM / DD / YYYY

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Anthon Case 16-15617

Debtor 1

Doc 1

For your attorney, if you are represented by one

If you are not represented by an attorney, you do not need to file this page.

X

I, the attorney for the debtor(s) named in this petition, declare that I have informed the debtor(s) about eligibility to proceed under Chapter 7, 11, 12, or 13 of title 11, United States Code, and have explained the relief available under each chapter for which the person is eligible. I also certify that I have delivered to the debtor(s) the notice required by 11 U.S.C. § 342(b) and, in a case in which § 707(b)(4)(D) applies, certify that I have no knowledge after an inquiry that the information in the schedules filed with the petition is incorrect.

| rrect. | | | | |
|--|-------|------|--------------------------|-------------------------|
| /s/ Daniel Giannola Signature of Attorney for Debtor | | Date | 5/6/2016 MM / DD / YY | YY |
| Daniel Giannola Printed name | | | | |
| Semrad Law Firm Firm name | | | | |
| Street | | | | |
| City | State | | | Zip Code |
| Contact phone | | Em | ail address | dgiannola@semradlaw.com |
| Bar number | | Sta | te | |

Doc 1 Filed 05/06/16 Entered 05/06/16 17:14:37 Desc Main Fill in this information to identify your case: Debtor 1 Anthony LaCour First Name Middle Name Last Name Debtor 2 (Spouse, if filing) First Name Middle Name Last Name United States Bankruptcy Court for the: Northern District of Illinois (State) Case number (If known) Check if this is an amended filing Official Form 106Sum Summary of Your Assets and Liabilities and Certain Statistical Information 12/15 Be as complete and accurate as possible. If two married people are filing together, both are equally responsible for supplying correct information. Fill out all of your schedules first; then complete the information on this form. If you are filing amended schedules after you file your original forms, you must fill out a new Summary and check the box at the top of this page. **Summarize Your Assets** Your assets Value of what you own 1. Schedule A/B: Property (Official Form 106A/B) \$0.00 1a. Copy line 55, Total real estate, from Schedule A/B..... \$23,026.00 1b. Copy line 62, Total personal property, from Schedule A/B \$23,026.00 1c. Copy line 63, Total of all property on Schedule A/B..... Summarize Your Liabilities Your liabilities Amount you owe 2. Schedule D: Creditors Who Have Claims Secured by Property (Official Form 106D) \$17,424.00 2a. Copy the total you listed in Column A, Amount of claim, at the bottom of the last page of Part 1 of Schedule D 3. Schedule E/F: Creditors Who Have Unsecured Claims (Official Form 106E/F) \$0.00 3a. Copy the total claims from Part 1 (priority unsecured claims) from line 6e of Schedule E/F...... \$8,775.00 3b. Copy the total claims from Part 2 (nonpriority unsecured claims) from line 6j of Schedule E/F..... \$26,199.00 Your total liabilities Summarize Your Income and Expenses 4. Schedule I: Your Income (Official Form 106I) \$1,725.16 Copy your combined monthly income from line 12 of Schedule I.....

5. Schedule J: Your Expenses (Official Form 106J)

Copy your monthly expenses from line 22, Column A, of Schedule J.....

\$1,300.00

| 7. \ | What kind of debt do you have? | | | | | | | | |
|-------------|--|--------------|----------|--|--|--|--|--|--|
| | Your debts are primarily consumer debts. Consumer debts are those incurred by an individual primarily for a personal, family, or household purpose. 11 U.S.C. § 101(8). Fill out lines 8-10 for statistical purposes. 28 U.S.C. § 159. | | | | | | | | |
| | Your debts are not primarily consumer debts. You have nothing to report on this part of the form. Check this box and submit this form to the court with your other schedules. | | | | | | | | |
| 8. | From the <i>Statement of Your Current Monthly Income:</i> Copy your total current monthly income from Form 122A-1 Line 11; OR , Form 122B Line 11; OR , Form 122C-1 Line 14. | Official | \$882.16 | | | | | | |
| 9. | Copy the following special categories of claims from Part 4, line 6 of Schedule E/F: | | | | | | | | |
| | From Part 4 on Schedule E/F, copy the following: | Total claim | | | | | | | |
| | 9a. Domestic support obligations (Copy line 6a.) | \$0.00 | | | | | | | |
| | 9b. Taxes and certain other debts you owe the government. (Copy line 6b.) | \$0.00 | | | | | | | |
| | 9c. Claims for death or personal injury while you were intoxicated. (Copy line 6c.) | \$0.00 | | | | | | | |
| | 9d. Student loans. (Copy line 6f.) | \$0.00 | | | | | | | |
| | 9e. Obligations arising out of a separation agreement or divorce that you did not report as | \$0.00 | | | | | | | |
| | priority claims. (Copy line 6g.) | #0.00 | | | | | | | |
| | 9f. Debts to pension or profit-sharing plans, and other similar debts. (Copy line 6h.) | \$0.00 | | | | | | | |

\$0.00

9g. Total. Add lines 9a through 9f.

| | Case 16-15617 | Doc 1 | Filed 05/06/16 | Entered 05/06/16 | 17:14:37 | Desc Main |
|--|---|--|---|---|---------------------------------------|---|
| Fill in this | information to identify your case: | | | <u> </u> | | |
| Debtor 1 | Anthony | | LaCou | ır | | |
| | First Name | Middle | | | | |
| Debtor 2 | | | | | | |
| (Spouse, | if filing) First Name | Middle | Name Last N | lame | | |
| United Sta | ates Bankruptcy Court for the: | Northern | District of III | linois | | |
| • | | | (5 | State) | | |
| Case num (If known) | nber | | | | | |
| | | | | | | Check if this is an |
| Officia | al Form 106A/B | | | | | amended filing |
| Sche | dule A/B: Prope | rty | | | | 12/1 |
| ategory vesponsib rrite your Part 1: | tegory, separately list and deso where you think it fits best. Be ble for supplying correct inform name and case number (if kno Describe Each Residence u own or have any legal or equ | as complete and nation. If more s own). Answer ev se, Building, | d accurate as possible. I space is needed, attach ery question. Land, or Other Rea | f two married people are filin a separate sheet to this form I Estate You Own or Ha | g together, both . On the top of a | are equally ny additional pages, |
| ✓ | No. Go to Part 2 | | | | | |
| | Yes. Where is the property? | | | | | |
| | | | What is the property | • • • | | cured claims or exemptions. Put y secured claims on <i>Schedule D:</i> |
| 1.1 | Street address, if available, or o | ther description | Single-family home | | | lave Claims Secured by Property. |
| | | · | Duplex or multi-uni | ŭ | Current value of | of the Current value of the |
| | - | | Condominium or co | • | entire property? | |
| | | | Land | Julie Horne | | - |
| | Number Street | | Investment property | 1 | Describe the na | ture of your ownership |
| | | | Timeshare | | interest (such a | s fee simple, tenancy by |
| | City State | Zip Code | Other | | tne entireties, o | r a life estate), if known. |
| | | | M/L - L | ! (I | | |
| | | | Debtor 1 only | in the property? Check one. | (see instruc | s is community property ctions) |
| | | | | | Ц (останова | , |
| | | | Debtor 2 only | or 2 only | | |
| | | | Debtor 1 and Debto At least one of the o | • | | |
| | | | _ | u wish to add about this item | n, such as local | |
| If you | own or have more than one, list he | ere: | | | | |
| | | | What is the property | ? Check all that apply. | | cured claims or exemptions. Put |
| 1.2 | Street address, if available, or o | ther description | Single-family home | ; | | y secured claims on Schedule D: lave Claims Secured by Property. |
| | Officer address, if available, of c | uner description | Duplex or multi-uni | t building | | , , , , , , , , , , , , , , , , , , , |
| | | | Condominium or co | operative | Current value of entire property? | |
| | | | Manufactured or mo | obile home | | |
| | Number Street | | Land | | Danasiha tha wa | f |
| | Number Street | | Investment property | (| interest (such a | ture of your ownership s fee simple, tenancy by |
| | 0'' | 7'- 0 - 1- | Timeshare Other | | the entireties, o | r a life estate), if known. |
| | City State | Zip Code | | | | |
| | | | Who has an interest | in the property? Check one. | Check if thi | s is community property |
| | | | Debtor 1 only | | (see instruc | |
| | | | Debtor 2 only | | | |
| | | | Debtor 1 and Debto | or 2 only | | |
| | | | At least one of the o | lebtors and another | | |
| | | | Other information you | u wish to add about this item | n, such as local | |
| | | | Other information you property identification | u wish to add about this iten n number: | n, such as local | |

| otor 1 | Anthon Case 16-15 First Name | 617 Doc 1 Middle Name | <u>Filed 05/06/16 Entered</u> 05/06/1 Documeମାଳ Page 11 of 69 | | |
|--|--|---|---|--|---|
| | eet address, if available, or mber Street | other description Zip Code | What is the property? Check all that apply. Single-family home Duplex or multi-unit building Condominium or cooperative Manufactured or mobile home Land Investment property Timeshare Other | the amount of any secure | mple, tenancy by |
| | | | Who has an interest in the property? Check one. Debtor 1 only Debtor 2 only Debtor 1 and Debtor 2 only At least one of the debtors and another | Check if this is co | mmunity property |
| ou na | ive attached for Part 1. W | rite that number h | ere | > | |
| t 2: vou o | Describe Your Vehic wn, lease, or have legal on that someone else drives. If your | :les r equitable interes rou lease a vehicle, a | t in any vehicles, whether they are registered or not? also report it on Schedule G: Executory Contracts and Une | Include any vehicles | |
| t 2: you o | Describe Your Vehice wn, lease, or have legal of that someone else drives. If your ans, trucks, tractors, sport upon | :les r equitable interes rou lease a vehicle, a | t in any vehicles, whether they are registered or not? also report it on Schedule G: Executory Contracts and Une | Include any vehicles | |
| t 2: you or pwn the ars, va No | Describe Your Vehice wn, lease, or have legal of the part of the p | :les r equitable interes rou lease a vehicle, a | t in any vehicles, whether they are registered or not? also report it on Schedule G: Executory Contracts and Une | Include any vehicles xpired Leases. Do not deduct secured of the amount of any secure Creditors Who Have Classification Current value of the entire property? | laims or exemptions. Put ed claims on Schedule D: aims Secured by Property Current value of the portion you own? |
| t 2: you or pwn the ars, va No | Describe Your Vehice wn, lease, or have legal of the part of the p | r equitable interest you lease a vehicle, a stillity vehicles, motor Audi A4 2006 | t in any vehicles, whether they are registered or not? also report it on Schedule G: Executory Contracts and Une cycles Who has an interest in the property? Check one. Debtor 1 only Debtor 2 only | Include any vehicles xpired Leases. Do not deduct secured of the amount of any secure Creditors Who Have Cla | ed claims on Schedule D: aims Secured by Property Current value of the |
| t 2: you or pwn the ars, va No | Describe Your Vehice wn, lease, or have legal of the part of the p | r equitable interest you lease a vehicle, a stillity vehicles, motor Audi A4 2006 | t in any vehicles, whether they are registered or not? also report it on Schedule G: Executory Contracts and Une rcycles Who has an interest in the property? Check one. Debtor 1 only Debtor 2 only Debtor 1 and Debtor 2 only At least one of the debtors and another Check if this is community property (see | Include any vehicles xpired Leases. Do not deduct secured of the amount of any secure Creditors Who Have Classification Current value of the entire property? \$7300.00 Do not deduct secured of the amount of any secure | ed claims on Schedule D: aims Secured by Property Current value of the portion you own? |

| Debtor 1 | Anthon Case 16-15617 Doc 1 | Filed 05/06/16 Entered 05/06/14 | andana da | c Main | |
|----------|---|--|--|-----------------------------|--|
| | First Name Middle Name | Document Page 12 of 69 | | | |
| 3.3 | Make | Who has an interest in the property? Check one. | Do not deduct secured cl the amount of any secure | | |
| | Model: Year: | Debtor 1 only | • | ims Secured by Property. | |
| | Approximate mileage: | | ordinors vino riave ora | iino occarca by 1 roporty. | |
| | ··· <u></u> | Debtor 2 only | Current value of the | Current value of the | |
| | Other information: | Debtor 1 and Debtor 2 only | entire property? | portion you own? | |
| | | At least one of the debtors and another | | | |
| | | Check if this is community property (see instructions) | | | |
| 3.4 | Make | Who has an interest in the property? Check | Do not deduct secured cl | | |
| | Model: Year: | one. | the amount of any secured claims on Schedule D: Creditors Who Have Claims Secured by Property | | |
| | Approximate mileage: | Debtor 1 only | Orcators who have old | iins occured by 1 topcity. | |
| | ··· | Debtor 2 only | Current value of the | Current value of the | |
| | Other information: | Debtor 1 and Debtor 2 only | entire property? | portion you own? | |
| | | At least one of the debtors and another | | | |
| | | Check if this is community property (see instructions) | | | |
| 4.1 | Yes Make | Who has an interest in the property? Check | Do not deduct secured cl | aims or exemptions. Put | |
| 4.1 | Make | Who has an interest in the property? Check | Do not deduct secured cl | • | |
| | Model: Year: | one. | the amount of any secured claims on Schedule D: | | |
| | Approximate mileage: | Debtor 1 only | Creditors writer lave Cla | Claims Secured by Property. | |
| | ··· <u> </u> | Debtor 2 only | Current value of the | Current value of the | |
| | Other information: | Debtor 1 and Debtor 2 only | entire property? | portion you own? | |
| | | At least one of the debtors and another | | | |
| | | Check if this is community property (see instructions) | | | |
| 4.2 | Make | Who has an interest in the property? Check | Do not deduct secured cl | • | |
| | Model: | one. | the amount of any secure | | |
| | Year: | Debtor 1 only | Creditors Who Have Cla | ims Secured by Property. | |
| | Approximate mileage: | Debtor 2 only | Current value of the | Current value of the | |
| | Other information: | Debtor 1 and Debtor 2 only | entire property? | portion you own? | |
| | | At least one of the debtors and another | | | |
| | | Check if this is community property (see instructions) | | | |
| 5. Add | the dollar value of the portion you own for a | all of your entries from Part 2, including any entries | for pages | 1425.00 | |
| vou ha | ive attached for Part 2. Write that number he | re | <u>\$2</u> | 1423.00 | |

Debtor 1 Anthon Case 16-15617 Doc 1 Filed 05/06/16 Entered 05/06/16 (147):14:37 Desc Main
First Name Docume Name Docume Page 13 of 69

Describe Your Personal and Household Items Part 3: Current value of the Do you own or have any legal or equitable interest in any of the following items? portion you own? Do not deduct secured claims or exemptions. 6. Household goods and furnishings Examples: Major appliances, furniture, linens, china, kitchenware □ No ✓ Yes. Describe... Used Furniture \$600.00 7. Electronics Examples: Televisions and radios; audio, video, stereo, and digital equipment; computers, printers, scanners; music Nο Yes. Describe... 8. Collectibles of value Examples: Antiques and figurines; paintings, prints, or other artwork; books, pictures, or other art objects; stamp, coin, or baseball card collections; other collections, memorabilia, collectibles **✓** No Yes. Describe... 9. Equipment for sports and hobbies Examples: Sports, photographic, exercise, and other hobby equipment; bicycles, pool tables, golf clubs, skis; canoes and kayaks; carpentry tools; musical instruments **✓** No Yes. Describe... 10. Firearms Examples: Pistols, rifles, shotguns, ammunition, and related equipment Yes. Describe... 11. Clothes Examples: Everyday clothes, furs, leather coats, designer wear, shoes, accessories Yes. Describe... **Used Clothing** \$500.00 12. Jewelry Examples: Everyday jewelry, costume jewelry, engagement rings, wedding rings, heirloom jewelry, watches, gems, gold, silver **~** No Yes. Describe... 13. Non-farm animals Examples: Dogs, cats, birds, horses **✓** No Yes. Describe... 14. Any other personal and household items you did not already list, including any health aids you did not list No Yes. Describe... 15. Add the dollar value of all of your entries from Part 3, including any entries for pages you have attached \$1100.00 for Part 3. Write that number here

Debtor 1 Anthon Case 16-15617
First Name
 Doc 1
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 Desc Main

 Middle Name
 Docume: 11 me
 Page 14 of 69

Describe Your Financial Assets

| Do | you own or have a | ny legal or equitable inte | rest in any of the following | g? | Current value of the portion you own? Do not deduct secured claims or exemptions. |
|-----|---|---|--|------------------------------|--|
| | ✓ No | in your wallet, in your home, in a sa | afe deposit box, and on hand when yo | ou file your petition Cash: | |
| 17. | | | certificates of deposit; shares in crecunts with the same institution, list each | | |
| | ✓ Yes | | Institution name: | | |
| | | 17.1. Checking account: | South Side Federal Credit Union | | \$486.00 |
| | | 17.2. Checking account: | | | |
| | | 17.3. Savings account: | South Side Federal Credit Union | | \$15.00 |
| | | 17.4. Savings account: | | | |
| | | 17.5. Certificates of deposit: | | | |
| | | 17.6. Other financial account: | | | |
| | | 17.7. Other financial account: | | | |
| | | 17.8. Other financial account: | | | |
| | | 17.9. Other financial account: | | | |
| 18. | | or publicly traded stocks vestment accounts with brokerage | firms, money market accounts | | |
| | ✓ No ☐ Yes | Institution or issuer name: | | | |
| | | | | | |
| 19. | Non-publicly traded sto an LLC, partnership, a | ock and interests in incorporate nd joint venture | ed and unincorporated business | es, including an interest in | |
| | Yes. Give specific information about them | Name of entity | | % of ownership: | |
| | - | | | | |

| DCD | first Name | | OSKOVILO | <u>EIILEIEU</u> Was eu On nieu (ilk nowd) | 4.37 Desc Main |
|-----|--|---|------------------------|---|----------------|
| 20. | Government and corpo Negotiable instruments in | orate bonds and other negotiable a clude personal checks, cashiers' check | nd non-negotial | es, and money orders. | |
| | _ | nts are those you cannot transfer to son | neone by signing | or delivering them. | |
| | ✓ No | | | | |
| | Yes. Give specific information about | Issuer name: | | | |
| | them | issuel flame. | | | |
| | | | | | |
| | | | | | |
| | | | | | |
| 21. | Retirement or pension Examples: Interests in IR | accounts A, ERISA, Keogh, 401(k), 403(b), thrift | savings accounts | s, or other pension or profit-sharing p | olans |
| | ✓ No | | | | |
| | Yes. List each | Type of account: Ins | stitution name: | | |
| | account separately. | 401(k) or similar plan: — | | | |
| | | Pension plan: | | | |
| | | IRA: | | | |
| | | Retirement account: | | | |
| | | Keogh: | | | |
| | | Additional account: | | | |
| | | Additional account: | | | |
| 22. | Examples: Agreements v companies, or others | repayments eposits you have made so that you may vith landlords, prepaid rent, public utilition | | | |
| | ✓ No | Ins | stitution name: | | |
| | Yes | Electric: | | | |
| | | Gas: | | | |
| | | Heating oil: | | | |
| | | Security deposit on rental unit: | | | |
| | | Prepaid rent: | | | |
| | | Telephone: | | | |
| | | Water: | | | |
| | | Rented furniture: | | | |
| | | Other: | | | |
| 23. | Annuities (A contract for | a periodic payment of money to you, ei | ther for life or for a | number of years) | |
| | ✓ No ☐ Yes | Issuer name and description: | | | |
| | | | | | |
| | | | | | |

| Debte | or 1 | Anthon Ca | ase 1 | <u> 15617</u> | Doc 1 Middle Name | | 05/06/16 cumente | | | 6 (Aknowa) 4: <u>37</u> | Desc | <u> Main</u> |
|-------|----------|---|----------------------|--|--------------------------------------|--------------|---------------------|-----------------|-------------------|---|--------------------|---|
| 24. | | | | ation IRA, in), 529A(b), ar | | a qualifie | d ABLE progra | m, or under | a qualified stat | te tuition program. | | |
| | | No Yes | Institut | ion name and | description. Sep | arately file | the records of a | ny interests. | 11 U.S.C. § 521(| c): | | |
| 25. | ехе | sts, equita rcisable fo No Yes. Desc | r your | | sts in property | (other th | an anything lis | ted in line 1 |), and rights or | powers | | |
| 26. | Еха | ents, copy | rrights, rnet doi | | trade secrets, websites, procee | | | | ents | | | |
| 27. | Exa | | ding pe | | general intangil ve licenses, coo | | ssociation holdin | gs, liquor lice | enses, profession | nal licenses | | |
| Mon | ey (| or prope | erty o | wed to you | ı? | | | | | | por Do n | rent value of the tion you own? ot deduct secured as or exemptions. |
| 28. | ✓ | Yes. Give s about you a | pecific them, i | information including whet iled the return ears | | | | | | Federal: State: Local: | _ | |
| | Exan | ily suppor nples: Past No | | lump sum alim | nony, spousal sup | oport, child | support, mainte | nance, divord | e settlement, pro | operty settlement | | |
| | Ħ | | specific | information | | | | | | Alimony: Maintenance: Support: Divorce settlement Property settlement | | |
| | Exan | <i>nples:</i> Unpa | aid wag al Secu | - | | | - | pay, vacation | pay, workers' co | mpensation, | | |

| Debt | tor 1 | Anthon Case 16 First Name | 6-15617 | Doc 1 Middle Name | Filed 05/0 Docume | | <u>Entered</u> 05/06 Page 17 of 69 | h l 66/1476/14: <u>37</u> D | esc Main |
|------|----------------|---|-------------------|----------------------|----------------------|------------|--|------------------------------------|--|
| 31. | | rests in insurance p mples: Health, disabi | | rance; health | | | edit, homeowner's, or rent | er's insurance | |
| | | No Yes. Name the insura of each policy and lis | | | Company name: | | | Beneficiary: | Surrender or refund value: |
| 32. | If you | interest in property u are the beneficiary erty because someor No Yes. Describe | of a living trust | | | | olicy, or are currently entit | led to receive |] |
| 33. | Exar | mples: Accidents, em | | | | | ade a demand for paym | ent | |
| | | No Yes. Describe | | | | | | | |
| 34. | to se | er contingent and u et off claims No | unliquidated | claims of ev | ery nature, includ | ding cou | interclaims of the debto | or and rights | |
| 0.5 | | Yes. Describe | | | | | | | |
| 35. | ✓ | financial assets yo No Yes. Describe | u did not aire | ady list | | | | | |
| 36. | | | - | | _ | - | es for pages you have a | | \$501.00 |
| Part | 5: | Describe Any B | usiness-Re | elated Pro | pperty You Owr | n or Ha | ve an Interest In. L | ist any real estate i | n Part 1. |
| 37. | Do y | ou own or have an | y legal or equ | uitable intere | est in any busines | s-related | d property? | | |
| | | No. Go to Part 6. Yes. Go to line 38. | | | | | | | Current value of the portion you own? Do not deduct secured claims or exemptions |
| 38. | ✓ | ounts receivable or No Yes. Describe | commissions | s you alread | y earned | | | | |
| 39. | Office Exar | ce equipment, furn | | | odems, printers, co | piers, fax | machines, rugs, telephor | nes, desks, chairs, electror | nic devices |
| | | Yes. Describe | | | | | | | |

| Deb | tor 1 Anthon Case 16 | 5-1561/ DOC 1 | | | <u>esc Main</u> |
|---------------|---|---|--|------------------------------------|--|
| 40. | First Name Machinery, fixtures, eq | Middle Name uipment, supplies you u | Docum ^{et} nt ^{me} Pa(se in business, and tools of you | ge 18 of 69 r trade | |
| | ✓ No | | | | |
| | Yes. Describe | | | | |
| 41. | Inventory | | | | |
| | ✓ No | | | | |
| | Yes. Describe | | | | |
| 42. | Interests in partnershi | ps or joint ventures | | | |
| | ✓ No | | Name of optity | % of ownership: | |
| | Yes. Give specific information about them | | Name of entity: | % OI OWNEISHIP. | _ |
| 43 (| Customer lists, mailing | lists, or other compilation | ons | | |
| -io. C | | iists, or other compliant | ,,,,, | | |
| | No No your lists in | clude personally identifiabl | e information (as defined in 11 U.S | C 8 101/41A\\2 | |
| | | ciude personally identiliabl | e illiottiation (as delined ill 11 0.5 | C. § 101(41A))! | |
| | ☐ No | | | | |
| | Yes. Descr | De | | | |
| 44. | Any business-related p | roperty you did not alrea | ady list | | |
| | ✓ No | | | | |
| | Yes. Give specific | | | | |
| | information | | - | | |
| | | | | | |
| | | | | | |
| | | | | | |
| | | | | | |
| | | | | | |
| | | to a single | ert 5, including any entries for pa | ges you have attached | |
| or Pa | art 5. Write that number | | | | |
| Part | | arm- and Commerc interest in farmland, list it i | | rty You Own or Have an Interest In | • |
| 46. | Do you own or have a | ny legal or equitable inte | rest in any farm- or commercial | fishing-related property? | |
| | No. Go to Part 7. Yes. Go to line 47. | | | | Current value of the portion you own? Do not deduct secured claims |
| 47. | Farm animals | | | | or exemptions |
| | Examples: Livestock, pou | ultry, farm-raised fish | | | |
| | ✓ No | | | | |
| | Yes. Describe | | | | |

| Deb | tor 1 | Anthon Case 16-15617 First Name | Doc 1 | | <u>Entered</u> 05/06/16 (147:14: <u>37</u> Page 19 of 69 | Desc | Main |
|--------------------|----------|--|--------------------|---------------------------|--|----------|--------------|
| 48. | Cro | ps-either growing or harvested | t | 2004 | . ago 10 0. 00 | | |
| | ✓ | No | | | | | |
| | | Yes. Describe | | | | | |
| 49. | Farr | m and fishing equipment, imple | ements, machir | nery, fixtures, and tools | of trade | | |
| | ✓ | No | | | | | |
| | | Yes. Describe | | | | | |
| 50. | Farı | m and fishing supplies, chemic | als, and feed | | | | |
| | ✓ | No | | | | | |
| | | Yes. Describe | | | | | |
| 51. | Any | farm- and commercial fishing- | related property | y you did not already lis | st | | |
| | ✓ | No | | | | | |
| | | Yes. Describe | | | | | |
| | | | | | | | |
| | | e dollar value of all of your enter the enterment of the contract of the enterment of the enterment of the contract of the enterment of the en | | | | | |
| | | | | | | <u>L</u> | |
| | | | | | | | |
| Part | | | | | nat You Did Not List Above | | |
| 53. | | you have other property of any mples: Season tickets, country club | | ot already list? | | | |
| | ✓ | | • | | | | |
| | _ | Yes. Give specific | | | | | - |
| | | information | | | | | |
| | | - | | | | | |
| 54 A | dd th | e dollar value of all of your ent | ries from Part 7 | Write that number her | 'e | | |
| 54. A | aa in | e dollar value of all of your enti | nes nom Part 1 | . Write that number her | e | | |
| | | | | | | | |
| Part | 8: | List the Totals of Each Pa | art of this Fo | orm | | | |
| <i>EE</i> 1 | | | | | | | |
| 55. r | -art i | : Total real estate, line 2 | | | | | |
| 56. p | oart 2 | total vehicles, line 5 | | \$21425.0 | 0 | | |
| 57. P | art 3: | : Total personal and household | l items, line 15 | \$1100.00 | | | |
| 58. P | art 4: | : Total financial assets, line 36 | | \$501.00 | | | |
| 59. F | Part 5 | : Total business-related proper | rty, line 45 | | | | |
| 60. F | Part 6 | : Total farm- and fishing-relate | ed property, line | 52 | | | |
| 61. F | Part 7 | : Total other property not listed | d, line 54 | | | | |
| 62. 7 | Γotal | personal property. Add lines 56 | through 61 | \$23026.0 | 0 | | + \$23026.00 |
| | | | | · | Copy personal property | :otal ▶ | |
| | | | | | | | \$23026.00 |
| 63. T | otal c | of all property on Schedule A/B | . Add line 55 + li | ne 62 | | | |

| Fill i | in this inform | Case 16-15617 ation to identify your case: | Doc 1 Filed 05/ | 06/16 Entered 05/0 | 6/16 17:14:37 | Desc Main |
|---|---|---|---|---|--|---|
| | otor 1 | Anthony First Name | Middle Name | LaCour Last Name | | |
| | otor 2 ouse, if filing) | | Middle Name | Last Name | | |
| Unit | ted States Ba | inkruptcy Court for the: | Northern [| District of Illinois | | |
| | se number nown) | | | (State) | | |
| Of | ficial F | form 106C | | | 1 | Check if this is a amended filing |
| Sc | hedul | C: The Prop | erty You Claim | as Exempt | | 12/1 |
| For s to exer rece exer prop | each iten o state a s mpted up eive certa mption of perty is d t1: Ident Which set | additional pages, writer of property you class pecific dollar amount to the amount of artin benefits, and tax-100% of fair market etermined to exceed the property You of exemptions are you ce claiming state and federal e claiming federal exemptions. | aim as exempt, you munt as exempt. Alternatively applicable statutory exempt retirement functivalue under a law that I that amount, your exempt laiming? Check one only, even nonbankruptcy exemptions. 11 U.S.C. § 522(b)(2) | st specify the amount of vely, you may claim the fullimit. Some exemptionsds—may be unlimited in the limits the exemption to emption would be limited in if your spouse is filing with you. | the exemption you ull fair market value —such as those fo dollar amount. Ho a particular dollar to the applicable s | r health aids, rights to wever, if you claim an amount and the value of the |
| | | ription of the property and the A/B that lists this property | nd line Current value of perty the portion you own | Amount of the exemption yo Check only one box for each ex | | cific laws that allow exemption |
| | | | Copy the value from Schedule A/B | | | |
| | Brief description | Used Clothing | \$500.00 | ▽ | | 735 ILCS 5/12-1001(a) |
| | Line from Schedule A | | | \$500.00 100% of fair market value, u applicable statutory limit | ip to any | |
| | Brief description | Used Furniture | \$600.00 | | | 735 ILCS 5/12-1001(b) |
| | Line from Schedule A | | | \$600.00 100% of fair market value, u applicable statutory limit | | |
| 3. | (Subject to | adjustment on 4/01/19 and | | 5? es filed on or after the date of adjus n 1,215 days before you filed this c | , | |

No Yes

Doc 1Filed 05/96/16Entered 05/96/1605/96/1614:37Desc MainMiddle NameDocument of the page 21 of 69 Debtor 1 Anthon Case 16-15617
First Name Part 2: Additional Page

| • | ion of the property and line A/B that lists this property | Current value of the portion you own Copy the value from Schedule A/B | Amount of the exemption you claim Check only one box for each exemption. | Specific laws that allow exemption |
|---|--|---|---|------------------------------------|
| Brief description: Line from Schedule A/B: | South Side Federal Credit Union | \$486.00 | \$486.00 100% of fair market value, up to any applicable statutory limit | 735 ILCS 5/12-1001(b) |
| Brief description: Line from Schedule A/B: | South Side Federal Credit Union | \$15.00 | \$15.00 100% of fair market value, up to any applicable statutory limit | 735 ILCS 5/12-1001(b) |
| Brief description: Line from Schedule A/B: | 2006 Audi A4 | \$7,300.00 | 100% of fair market value, up to any applicable statutory limit | 735 ILCS 5/12-1001(c) |

| | | Case 16-15617 | Doc 1 F | iled 05/06/16 | Entered 05/06 | /16 17:14:37 | Desc Main | |
|------------|-------------------------------|--|--|---|---|---|---|-----------------------------------|
| Fill | in this informa | ation to identify your case: | | | J | | | |
| Deb | otor 1 | Anthony | | LaCou | ır | | | |
| | | First Name | Middle Na | me Last N | lame | | | |
| | otor 2 ouse, if filing) | First Name | Middle Na | me Last N | lame | | | |
| Uni | ted States Ba | ankruptcy Court for the: | Northern | District of III | inois State) | | | |
| | se number nown) | | | (0 | | | | |
| Of | ficial F | orm 106D | | | | | | neck if this is a |
| Sc | chedu | le D: Credito | ors Who | Have Clair | ns Secured | by Prope | rtv | 12/1 |
| forn 1. | n. On the Do any cre No. Ch | ete and accurate as mation. If more space top of any additional ditors have claims secured this box and submit this II in all of the information between the control of the co | ce is needed, c al pages, write ed by your propert is form to the court w | opy the Addition your name and o | al Page, fill it out, case number (if kno | number the entri own). | | |
| | | All Secured Claims | | | | | | |
| 2. | claim. If mor | ured claims. If a creditor hare than one creditor has a part the claims in alphabetical | oarticular claim, list t | he other creditors in Pa | • • | Column A Amount of claim Do not deduct the value of collateral. | Column B Value of collateral that supports this claim | Column C Unsecured portion If any |
| 2.1 | WFDS | | Describe the n | roperty that secures | the claim: | \$8,799.00 | \$14,125.00 | \$0.00 |
| | Creditor's Na PO BOX 19 | | | · • | | 1 | | |
| | Number | Street | 2010 Chrysler As of the date | Town & Country Value: you file, the claim is: | : \$14,125.00 Check all that apply | | | |
| | | | Contingent | | onook all that apply. | | | |
| | IRVINE Citv | California 92623 State ZIP Code | — Unliquidate | ed | | | | |
| | - ', | the debt? Check one. | Disputed | | | | | |
| | ✓ Debtor | • | Nature of lien. | Check all that apply. | | | | |
| | Debtor Debtor | 2 only 1 and Debtor 2 only | An agreem car loan) | ent you made (such as | mortgage or secured | | | |
| | | one of the debtors and | Statutory lie | en (such as tax lien, me | echanic's lien) | | | |
| | another Check | if this claim relates to a | Judgment I | ien from a lawsuit | | | | |
| | commu | unity debt | Other (inclu | iding a right to offset) _ | | | | |
| | Date debt v | vas incurred <u>1/1/2015</u> | Last 4 digits o | f account number | 0214 | | | |
| 2.2 | Creditor's Na | | Describe the p | roperty that secures | the claim: | \$8,625.00 | \$7,300.00 | \$1,325.00 |
| | PO Box 96 | Street | | Value: \$7,300.00 you file, the claim is: | Check all that apply. | | | |
| | Fort Worth | n Texas 76161 | Contingent | | | | | |
| | City | State ZIP Code | Unliquidate | ed | | | | |
| | | the debt? Check one. | Disputed | | | | | |
| | Debtor | • | Nature of lien. | Check all that apply. | | | | |
| | | 2 only 1 and Debtor 2 only | | ent you made (such as | mortgage or secured | | | |
| | | one of the debtors and | car loan) Statutory lie | en (such as tax lien, me | echanic's lien) | | | |
| | another | | | ien from a lawsuit | | | | |
| | commu | if this claim relates to a unity debt | | iding a right to offset) _ | | | | |
| | Date debt v | vas incurred <u>8/1/2015</u> | Last 4 digits o | f account number | 1000 | | | |
| | | Add the dollar value of y | | | | \$17,424.00 | | |
| | | | | 1.0- | | | i contract of the contract of | |

| | | Case 16-1561 | 7 Doc 1 File | 2d 05/06/16 | Entered 05 | 5 <u>/0</u> 6/16 17:14:37 | Desc | Main | |
|------------------------------|--|---|--|---|---|---|---------------------------------|-------------------------------|-----------------------------|
| Fill in | this informa | ation to identify your case | | | | 0/10 17.14.57 | DC30 | IVICIII | |
| Debto | or 1 | Anthony | | LaCo | - | | | | |
| Debto | or 2 | First Name | Middle Name | e Last i | Name | | | | |
| | | First Name | Middle Name | e Last i | Name | | | | |
| United | d States Ba | nkruptcy Court for the: | Northern | District of <u>I</u> | llinois State) | | | | |
| Case (If kno | number wn) | | | | | | | | |
| Offic | cial Fo | orm 106E/F | | | | | Che | ck if this is an | amended filing |
| Scl | hedu | le E/F: Cre | ditors Who | o Have U | nsecure | d Claims | | | 12/15 |
| 106Á/E are list the bo | 3) and on Sted in Sche xes on the | Schedule G: Executory edule D: Creditors Who | Contracts and Unexported Claims Secured Number 1997 Properties of the Page to this page 1997 Properties of the Pag | oired Leases (Officed by Property. If mage. On the top of | ial Form 106G). Do ore space is need | ry contracts on <i>Schedu</i> , not include any credito ed, copy the Part you no ges, write your name an | rs with parti ed, fill it ou | allý secured t, number the | claims that e entries in |
| 1. I | _ ′ | ditors have priority una to Part 2. | secured claims agains | t you? | | | | | |
| i F | identify wha cossible, lis Part 1. If mo | t type of claim it is. If a cl | aim has both priority and al order according to the ds a particular claim, list | nonpriority amounts creditor's name. If the other creditors | s, list that claim here you have more than in Part 3. | n, list the creditor separate and show both priority and two priority unsecured cla | d nonpriority a | amounts. As n | nuch as |
| | | | | | | | Total claim | Priority amount | Nonpriority amount |
| | | | | | | | | | |

Filed 05/06/16 Entered 05/06/16 14-7-414:37 Desc Main Doc 1 Debtor 1 Documernt Page 24 of 69 List All of Your NONPRIORITY Unsecured Claims Do any creditors have nonpriority unsecured claims against you? No. You have nothing to report in this part. Submit this form to the court with your other schedules. ◪ List all of your nonpriority unsecured claims in the alphabetical order of the creditor who holds each claim. If a creditor has more than one priority unsecured claim, list the creditor separately for each claim. For each claim listed, identify what type of claim it is. Do not list claims already included in Part 1. If more than one creditor holds a particular claim, list the other creditors in Part 3.If you have more than four priority unsecured claims fill out the Continuation Page of **Total claim** 4.1 AD ASTRA RECOVERY SERV \$268.00 Last 4 digits of account number Nonpriority Creditor's Name 7330 W 33RD ST N STE 118 When was the debt incurred? 2/1/2016 Number Street As of the date you file, the claim is: Check all that apply. Contingent **WICHITA** Kansas 67205 Unliquidated City State Zip Code Who incurred the debt? Check one. Disputed Debtor 1 only |√| Type of NONPRIORITY unsecured claim: Debtor 2 only Student loans Debtor 1 and Debtor 2 only Obligations arising out of a separation agreement or divorce that At least one of the debtors and another you did not report as priority claims Debts to pension or profit-sharing plans, and other similar debts Check if this claim relates to a community debt 001 Collection; Collecting for ORIGINAL ✓ Is the claim subject to offset? Other. Specify CREDITOR: SPEEDY CASH 128 **✓** No Yes 4.2 Carey & Carey \$400.00 Last 4 digits of account number Nonpriority Creditor's Name 13004 Western Ave When was the debt incurred? Number Street As of the date you file, the claim is: Check all that apply. Contingent Unliquidated Blue Island 60406 Illinois City State Zip Code Disputed Who incurred the debt? Check one. Type of NONPRIORITY unsecured claim: Debtor 1 only Student loans Debtor 2 only Obligations arising out of a separation agreement or divorce that Debtor 1 and Debtor 2 only you did not report as priority claims At least one of the debtors and another Debts to pension or profit-sharing plans, and other similar debts Check if this claim relates to a community debt Other. Specify Attorney Fees Is the claim subject to offset? I✓I No Yes 4.3 check into Cash \$0.00 Last 4 digits of account number Nonpriority Creditor's Name 1637 S. Cicero When was the debt incurred? Street Number As of the date you file, the claim is: Check all that apply. Contingent Cicero Illinois 60804 Unliquidated City Zip Code Who incurred the debt? Check one. Disputed Debtor 1 only l√| Type of NONPRIORITY unsecured claim: Debtor 2 only Student loans Debtor 1 and Debtor 2 only Obligations arising out of a separation agreement or divorce that At least one of the debtors and another you did not report as priority claims Debts to pension or profit-sharing plans, and other similar debts Check if this claim relates to a community debt Other. Specify Payday Loan Is the claim subject to offset? Ⅵ No Yes

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Part 2: Your NONPRIORITY Unsecured Claims - Continuation Page

| | After listing any entries on this page, number them beginning with 4.5, followed by 4.6, and so forth. | | | | |
|-----|--|--|------------|--|--|
| 4.4 | Check 'N Go | Last 4 digits of account number | \$120.00 | | |
| | Nonpriority Creditor's Name 5638 W Fullerton | When was the debt incurred? | | | |
| | Number Street | | | | |
| | | As of the date you file, the claim is: Check all that apply. | | | |
| | Chicago Illinois 60639 | Contingent | | | |
| | City State Zip Code | Unliquidated | | | |
| | Who incurred the debt? Check one. Debtor 1 only | Disputed | | | |
| | Debtor 2 only | Type of NONPRIORITY unsecured claim: | | | |
| | Debtor 1 and Debtor 2 only | Student loans | | | |
| | At least one of the debtors and another | Obligations arising out of a separation agreement or divorce that | | | |
| | 불 | you did not report as priority claims Debts to pension or profit-sharing plans, and other similar debts | | | |
| | Check if this claim relates to a community debt Is the claim subject to offset? | ✓ Other. Specify Payday Loan | | | |
| | No | T dyddy Louiri | | | |
| | Yes | | | | |
| 4.5 | City of Chicago Parking | | \$5.390.00 | | |
| 1.0 | Nonpriority Creditor's Name | Last 4 digits of account number | Ψ5,590.00 | | |
| | 121 N. LaSalle St # 107A Number Street | When was the debt incurred?n/a | | | |
| | | As of the date you file, the claim is: Check all that apply. | | | |
| | Chicago Illinois 60602 | Contingent | | | |
| | City State Zip Code | Unliquidated | | | |
| | Who incurred the debt? Check one. | Disputed | | | |
| | Debtor 1 only | Type of NONPRIORITY unsecured claim: | | | |
| | Debtor 2 only | Student loans | | | |
| | Debtor 1 and Debtor 2 only | Obligations arising out of a separation agreement or divorce that | | | |
| | At least one of the debtors and another | you did not report as priority claims | | | |
| | Check if this claim relates to a community debt | Debts to pension or profit-sharing plans, and other similar debts | | | |
| | Is the claim subject to offset? | ✓ Other. Specify Parking Tickets | | | |
| | 二 。 | | | | |
| | Yes | | | | |
| 4.6 | ComEd Nonpriority Creditor's Name | Last 4 digits of account number | \$300.00 | | |
| | 3 Lincoln Center | When was the debt incurred?n/a | | | |
| | Number Street | As of the date you file, the claim is: Check all that apply. | | | |
| | | Contingent | | | |
| | Oakbrook Terrace Illinois 60181 City State Zip Code | Unliquidated | | | |
| | Who incurred the debt? Check one. | Disputed | | | |
| | Debtor 1 only | Type of NONPRIORITY unsecured claim: | | | |
| | Debtor 2 only | Student loans | | | |
| | Debtor 1 and Debtor 2 only | = | | | |
| | At least one of the debtors and another | Obligations arising out of a separation agreement or divorce that you did not report as priority claims | | | |
| | Check if this claim relates to a community debt | Debts to pension or profit-sharing plans, and other similar debts | | | |
| | Is the claim subject to offset? | ✓ Other. Specify Electric Bill | | | |
| | ✓ No | | | | |
| | Yes | | | | |

Part 2: Anthon Case 16-15617 Doc 1 Filed 05/06/16 Entered 05/06/16 (1476/14:37 Desc Main Document Page 26 of 69

| | After listing any entries on this page, number them beginning | with 4.5, followed by 4.6, and so forth. | Total claim |
|-----|---|---|-------------|
| 4.7 | CONVERGENT OUTSOURCING | Last 4 digits of account number 9333 | \$120.00 |
| | Nonpriority Creditor's Name Po Box 9004 | When was the debt incurred? 5/1/2015 | |
| | Number Street | As of the date you file, the claim is: Check all that apply. | |
| | | Contingent | |
| | Renton Washington 98057 | Unliquidated | |
| | City State Zip Code Who incurred the debt? Check one. | Disputed | |
| | Debtor 1 only | Type of NONPRIORITY unsecured claim: | |
| | Debtor 2 only | | |
| | Debtor 1 and Debtor 2 only | Student loans | |
| | At least one of the debtors and another | Obligations arising out of a separation agreement or divorce that you did not report as priority claims | |
| | Check if this claim relates to a community debt | Debts to pension or profit-sharing plans, and other similar debts | |
| | Is the claim subject to offset? | ✓ 001 Collection; Collecting for ORIGINAL | |
| | ✓ No | Other. Specify <u>CREDITOR: COMCAST</u> | |
| | Yes | | |
| 4.8 | FST PREMIER | — Last 4 digits of account number 2796 | \$441.00 |
| | Nonpriority Creditor's Name 3820 N LOUISE AVE | When was the debt incurred? 6/1/2009 | |
| | Number Street | | |
| | | As of the date you file, the claim is: Check all that apply. | |
| | SIOUX FALLS South Dakota 57107 | Contingent | |
| | City State Zip Code | Unliquidated | |
| | Who incurred the debt? Check one. Debtor 1 only | Disputed | |
| | Debtor 2 only | Type of NONPRIORITY unsecured claim: | |
| | Debtor 1 and Debtor 2 only | Student loans | |
| | At least one of the debtors and another | Obligations arising out of a separation agreement or divorce that you did not report as priority claims | |
| | Check if this claim relates to a community debt | Debts to pension or profit-sharing plans, and other similar debts | |
| | Is the claim subject to offset? | ✓ Other. Specify <u>CreditCard</u> | |
| | <u>✓</u> No | | |
| | Yes | | |
| 4.9 | PEOPLES ENGY | Last 4 digits of account number 7391 | \$836.00 |
| | Nonpriority Creditor's Name 200 EAST RANDOLPH | When was the debt incurred? 10/1/2015 | |
| | Number Street | | |
| | | As of the date you file, the claim is: Check all that apply. Contingent | |
| | CHICAGO Illinois 60601 | Unliquidated | |
| | City State Zip Code Who incurred the debt? Check one. | | |
| | Debtor 1 only | Disputed | |
| | Debtor 2 only | Type of NONPRIORITY unsecured claim: | |
| | Debtor 1 and Debtor 2 only | Student loans | |
| | At least one of the debtors and another | Obligations arising out of a separation agreement or divorce that you did not report as priority claims | |
| | Check if this claim relates to a community debt | Debts to pension or profit-sharing plans, and other similar debts | |
| | Is the claim subject to offset? | ✓ Other. Specify InstallmentLoan | |
| | ✓ No | | |
| | Yes | | |

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Part 2: Your NONPRIORITY Unsecured Claims - Continuation Page

| | After listing any entries on this page, number them beginning | y with 4.5, followed by 4.6, and so forth. | Total claim |
|------|---|---|-------------|
| 4.10 | TMobile | Last 4 digits of account number | \$200.00 |
| | Nonpriority Creditor's Name P.O. Box 742596 | | |
| | Number Street | When was the debt incurred?n/a | |
| | | As of the date you file, the claim is: Check all that apply. | |
| | Cincinnati Ohio 45274 | Contingent | |
| | City State Zip Code | Unliquidated | |
| | Who incurred the debt? Check one. Debtor 1 only | Disputed | |
| | Debtor 2 only | Type of NONPRIORITY unsecured claim: | |
| | Debtor 1 and Debtor 2 only | Student loans | |
| | At least one of the debtors and another | Obligations arising out of a separation agreement or divorce that you did not report as priority claims | |
| | Check if this claim relates to a community debt | Debts to pension or profit-sharing plans, and other similar debts | |
| | Is the claim subject to offset? | Other. Specify Phone BIII | |
| | No | <u> </u> | |
| | Yes | | |
| 4.11 | University of Chicago Medicine | | \$500.00 |
| | Nonpriority Creditor's Name | Last 4 digits of account number | |
| | 15965 Collections Center Dr Number Street | When was the debt incurred?n/a | |
| | | As of the date you file, the claim is: Check all that apply. | |
| | Chicago Illinois 60693 | Contingent | |
| | ChicagoIllinois60693CityStateZip Code | Unliquidated | |
| | Who incurred the debt? Check one. | Disputed | |
| | Debtor 1 only | Type of NONPRIORITY unsecured claim: | |
| | Debtor 2 only | Student loans | |
| | Debtor 1 and Debtor 2 only | Obligations arising out of a separation agreement or divorce that | |
| | At least one of the debtors and another | you did not report as priority claims | |
| | Check if this claim relates to a community debt | Debts to pension or profit-sharing plans, and other similar debts | |
| | Is the claim subject to offset? | ✓ Other. Specify Medical Bill | |
| | ✓ No | | |
| | Yes | | |
| 4.12 | VERIZON Nonpriority Creditor's Name | Last 4 digits of account number | \$200.00 |
| | NATIONAL RECOVERY P.O. BOX 26055 | When was the debt incurred?n/a | |
| | Number Street | As of the date you file, the claim is: Check all that apply. | |
| | | Contingent | |
| | MINNEAPOLIS Minnesota 55426 City State Zip Code | Unliquidated | |
| | City State Zip Code Who incurred the debt? Check one. | Disputed | |
| | Debtor 1 only | Type of NONPRIORITY unsecured claim: | |
| | Debtor 2 only | Student loans | |
| | Debtor 1 and Debtor 2 only | = | |
| | At least one of the debtors and another | Obligations arising out of a separation agreement or divorce that you did not report as priority claims | |
| | Check if this claim relates to a community debt | Debts to pension or profit-sharing plans, and other similar debts | |
| | Is the claim subject to offset? | Other. Specify Phone BIII | |
| | ✓ No | _ | |
| | □ Vos | | |

Debtor 1 Anthon Case 16-15617
First Name Doc 1 Filed 05/06/16 Entered 05/06/16 (1476):14:37 Desc Main

Middle Name Docume 11th Page 28 of 69 Add the Amounts for Each Type of Unsecured Claim

| | nounts of certain types of unsecured claims. This information is for sounts for each type of unsecured claim. | tatistical reporting purposes only. 28 U.S.C. §159. |
|--------------------------|--|---|
| | | Total claims |
| Total claims from Part 1 | 6a. Domestic support obligations. 6a | \$0.00 |
| | 6b. Taxes and certain other debts you owe the government 6b | so |
| | 6c. Claims for death or personal injury while you were intoxicated 6c | \$0.00 |
| | 6d. Other. Add all other priority unsecured claims. Write that amount here. | l. <u>\$0.00</u> |
| | 6e. Total. Add lines 6a through 6d. | \$0.00 |
| | | Total claims |
| Total claims from Part 2 | 6f. Student loans 6f | \$0.00 |
| | 6g. Obligations arising out of a separation agreement or divorce 6g that you did not report as priority claims | \$0.00 |
| | 6h. Debts to pension or profit-sharing plans, and other similar 6h debts | h. \$0.00 |
| | 6i. Other. Add all other nonpriority unsecured claims. Write that 6i amount here. | \$8,775.00 |
| | 6j. Total. Add lines 6f through 6i. | \$8,775.00 |

| | Case 16-1561 | 7 Doc 1 Filed 0 | 5/06/16 Ent | ered 05/06/16 17:14:37 | Desc Main |
|------------------------|-------------------------------|-----------------------------------|------------------------------|--|------------------------------------|
| Fill in this inform | nation to identify your case | | | 0/10 17.14.07 | DC3C Main |
| Debtor 1 | Anthony | | LaCour | | |
| Debtor 2 | First Name | Middle Name | Last Name | | |
| (Spouse, if filing | First Name | Middle Name | Last Name | | |
| United States Ba | ankruptcy Court for the: | Northern | District of Illinois (State) | | |
| Case number (If known) | - | | (, | | |
| Official I | Form 106G | | | | Check if this is an amended filing |
| Schedul | e G: Execut | ory Contracts | and Unexp | ired Leases | 12/1 |
| | d, copy the additional p | | | h are equally responsible for supply o this page. On the top of any additi | |
| 1. Do you ha | ave any executory | contracts or unexpired | l leases? | | |
| ✓ No. Che | ck this box and file this for | rm with the court with your othe | er schedules. You have | nothing else to report on this form. | |
| Yes. Fill | in all of the information be | elow even if the contracts or lea | ases are listed on Sch | edule A/B: Property (Official Form 106A | /B). |
| | | | | . Then state what each contract or le nore examples of executory contracts an | |
| Person | or company with whor | n you have the contract or le | ease | State what the contrac | t or lease is for |
| | | | | | |

| | | Case 16-1561 | 7 Doc 1 Filed 0 | 5/06/16 Entered | 05/06/16 17·1 <i>/</i> 1·37 | Desc Main |
|--------------|----------------------------|-----------------------------|---|---------------------------------|------------------------------------|--|
| Fill | in this inform | ation to identify your case | | U | 0/10 17:14:57 | Desc Main |
| De | btor 1 | Anthony | | LaCour | | |
| D- | h O | First Name | Middle Name | Last Name | | |
| | btor 2 ouse, if filing) | First Name | Middle Name | Last Name | _ | |
| Un | ited States Ba | ankruptcy Court for the: | Northern | District of Illinois | | |
| | se number | | | (State) | _ | |
| | | | | | | Check if this is a |
| \bigcirc 1 | ficial F | Form 106H | | | | amended filing |
| | | - | | | | |
| 50 | nedui | e H: Your Co | debtors | | | 12/1 |
| ever | y question. | | | list either spouse as a codebto | | ase number (if known). Answer |
| 2. | Louisiana, N | | ived in a community proper erto Rico, Texas, Washington, | | unity property states and territor | ies include Arizona, California, Idaho, |
| | | | ouse, or legal equivalent live v | vith you at the time? | | |
| | ☐ Y | | tate or territory did you live? _ | Fill in the | name and current address of th | at person. |
| | | Name of your spouse, for | ormer spouse, or legal equival | ent | - | |
| | | Number Street | | | - | |
| | | City | State | Zip Code | - | |
| 3. | as a codeb | tor only if that person is | s a guarantor or cosigner. I | Make sure you have listed the | | the person shown in line 2 again ficial Form 106D), <i>Schedule E/F</i> blumn 2. |
| | Column 1: | Your codebtor | | | Column 2: The creditor to | whom you owe the debt |

Check all schedules that apply:

| Fill in | this information to identify | your case: | | | | .7:14:37 | Desc Mai | n | |
|------------------------|---|---|-----------------------|--------------------------|---------------------------------------|-----------------------|--|--|--|
| Debtor | · 1 Anthony | | LaCou | r age o. r | 10103 | | | | |
| Debioi | First Name | Middle Name | Last Na | | | <u>.</u> | | | |
| Debtor | | | | | | Check if this | | | |
| (Spous | e, if filing) First Name | Middle Name | Last Na | ame | | An ame | ended filing | | |
| United | States Bankruptcy Court for the: | Northern | _ District of Illi | nois tate) | | | ement showing p es as of the follow | oost-petition chapter 13 ving date: | |
| Case n | number vn) | | | | | MM / D | D / YYYY | | |
| Offic | cial Form 106l | | | | | | | | |
| Sch | edule I: Your Inc | ome | | | | | | 12/15 | |
| nclud nform ages | nsible for supplying corrige information about you nation about your spouse, write your name and ca 1: Describe Employme | r spouse. If you are see. If more space is need se number (if known). | parated anded, attach | d your s a separa | pouse is not fil ite sheet to this | ing with yo | u, do not in | clude | |
| | Fill in your employment | yment | | Debtor 1 | | Debtor 2 | | | |
| | information. | Employment status | ☐ Employ | Employed | | Fmplo | Employed | | |
| | If you have more than one | | ✓ Not Em | | | _ | nployed | | |
| | job, attach a separate page with | | V Not Zim | pioyou | | | npioyod | | |
| | information about additional | Occupation | | | | | | | |
| | employers. | Employer's name | | | | | | | |
| | Include part time, seasonal, | Employer's address | | | | | | | |
| | or self-employed work. | | Number Stree | ∍t | | Number Str | eet | | |
| | Occupation may include student | | | | | | | | |
| | or homemaker, if it applies. | | | | | | | | |
| | | | City | | State Zip Code | City | State | e Zip Code | |
| | | How long employed there | ? | | | | | | |
| Part | 2: Give Details About I | Monthly Income | | | | | | | |
| are se | nate monthly income as of the opparated. | | - | | | · | , | | |
| | or your non-filing spouse have mo arate sheet to this form. | re than one employer, combine | the information | for all empl | oyers for that person | | - | nore space, attach | |
| | | | | | For Debtor 1 | For Debt non-filin | or 2 or g spouse | | |
| | List monthly gross wages, salar deductions.) If not paid monthly, ca | | | 2 | \$0.00 | <u> </u> | | | |
| 3. I | Estimate and list monthly overt | ime pay. | | 3 | + \$0.00 | <u> </u> | | | |
| 4. (| 4. Calculate gross income. Add line 2 + line 3. | | | | \$0.00 | | | | |

Anthony Case 16-15617 Filed 05/206/16 Entered @5406/166 17:14:37 Desc Main Doc 1 Middle Name Documentame Page 32 of 69 For Debtor 2 or For Debtor 1 non-filing spouse Copy line 4 here 4 \$0.00 5. List all payroll deductions: \$0.00 5a. Tax, Medicare, and Social Security deductions 5a. 5b. 5b. Mandatory contributions for retirement plans \$0.00 5c. Voluntary contributions for retirement plans 5c. \$0.00 5d. Required repayments of retirement fund loans 5d. \$0.00 5e. Insurance 5e. \$0.00 5f. Domestic support obligations 5f. \$0.00 5g. Union dues 5g. \$0.00 5h. Other deductions. Specify: 5h. -\$0.00 6. Add the payroll deductions. Add lines 5a + 5b + 5c + 5d + 5e + 5f + 5g + 5h. 6. \$0.00 7. Calculate total monthly take-home pay. Subtract line 6 from line 4. 7. \$0.00 8. List all other income regularly received: 8a. Net income from rental property and from operating a business, profession, or farm Attach a statement for each property and business showing gross receipts, ordinary and necessary business expenses, and the total \$0.00 8a. monthly net income. 8b. Interest and dividends 8b. \$0.00 8c. Family support payments that you, a non-filing spouse, or a dependent regularly receive Include alimony, spousal support, child support, maintenance, divorce settlement, and property settlement. 8c. \$0.00 8d. Unemployment compensation 8d. \$755.16 8e. Social Security 8e. \$843.00 8f. Other government assistance that you regularly receive Include cash assistance and the value (if known) of any non-cash assistance that you receive, such as food stamps (benefits under the Supplemental Nutrition Assistance Program) or housing subsidies Specify: Food Assistance Programs Income \$127.00 8f. 8g. Pension or retirement income 8g. \$0.00 8h. Other monthly income. Specify: 8h. + \$0.00 9. Add all other income Add lines 8a + 8b + 8c + 8d + 8e + 8f +8g + 8h. 9. \$1,725.16 10. Calculate monthly income. Add line 7 + line 9. 10. \$1,725.16 \$1,725.16 Add the entries in line 10 for Debtor 1 and Debtor 2 or non-filing spouse 11. State all other regular contributions to the expenses that you list in Schedule J. Include contributions from an unmarried partner, members of your household, your dependents, your roommates, and other friends or relatives Do not include any amounts already included in lines 2-10 or amounts that are not available to pay expenses listed in Schedule J. Specify 11. + \$0.00 12. Add the amount in the last column of line 10 to the amount in line 11. The result is the combined monthly income. 12. Write that amount on the Summary of Schedules and Statistical Summary of Certain Liabilities and Related Data, if it applies \$1,725.16 Combined monthly income 13. Do you expect an increase or decrease within the year after you file this form? Yes. Explain:

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| Fill in this info | Case 16-1561 | | 5/06/16 Entered 05/00 | 6/16 17:14:37 | Desc Mai | in |
|--------------------------|---|---|--|--------------------|----------------------|--------------|
| FIII IN THIS INTO | ormation to identify your cas | e: | · · | | | |
| Debtor 1 | Anthony | | LaCour | | | |
| | First Name | Middle Name | Last Name | | | |
| Debtor 2 | ing) First Name | Middle Nome | Loot Name | Check if this is: | | |
| (Opouse, ii iiii | 119) First Name | Middle Name | Last Name | An amended filing | J | |
| United States | Bankruptcy Court for the: | Northern | District of Illinois | A supplement sho | • | • |
| Case number | • | | (State) | expenses as of th | e following date | : |
| (If known) | | | | MM / DD / YYYY | | |
| | | | | 1011017 2227 11111 | | |
| Official | Form 106J | | | | | |
| Schedi | ıle J: Your Ex | nenses | | | | 12/15 |
| | | • | | | | 12,10 |
| nformation. I | | | e filing together, both are equally re form. On the top of any additional p | | | nber |
| | scribe Your Househ | old | | | | |
| 1. Is this a jo | | Jiu | | | | |
| _ ` | | | | | | |
| ✓ No. G | Go to line 2 | | | | | |
| Yes. | Does Debtor 2 live in a se | parate household? | | | | |
| | No | | | | | |
| | _ | Official Forms 100 LO. Franco | and for Congress Household of Dobtor | 2 | | |
| | | | ses for Separate Household of Debtor | Z. | | |
| • | • = | lo | | | | |
| Do not list Debtor 2. | | es. Fill out this information for ach dependent | Dependent's relationship to Debtor 1 or Debtor 2 | Dependent's age | Does deper with you? | ndent live |
| • | xpenses include | 1- | | | | |
| expenses than | of people other | lo | | | | |
| yourself a | nd your | 'es | | | | |
| depender | • | | | | | |
| Part 2: Est | timate Your Ongoing | Monthly Expenses | | | | |
| | s of a date after the bankr | | you are using this form as a supple plemental Schedule J, check the b | | |) |
| Include expe | enses paid for with non-c | ash government assistance | if you know the value of | | | |
| | | t on Schedule I: Your Income | | | Y | our expenses |
| | al or home ownership exp for the ground or lot. 4. | enses for your residence. Ind | clude first mortgage payments and | | 4. | \$300.00 |
| If not in | cluded in line 4: | | | | | |
| 4a. Real | estate taxes | | | | 4a | \$0.00 |
| | | | | | | |
| 4b. Prop | erty, homeowner's, or rente | r's insurance | | | 4b. | \$0.00 |

\$0.00

4d.

4d. Homeowner's association or condominium dues

Debtor 1 Anthon Case 16-15617 Doc 1 Filed 05/06/16 Entered 05/06/16 (147):14:37 Desc Main

Document Page 35 of 69 Your expenses 5. Additional mortgage payments for your residence, such as home equity loans \$0.00 5. 6. Utilities: 6a. Electricity, heat, natural gas \$120.00 6a. 6b. Water, sewer, garbage collection \$0.00 6b. 6c. Telephone, cell phone, Internet, satellite, and cable services \$101.00 6c. 6d. Other. Specify: \$0.00 6d 7. Food and housekeeping supplies \$200.00 7. 8. Childcare and children's education costs \$0.00 8. 9. Clothing, laundry, and dry cleaning \$60.00 9. 10. Personal care products and services \$100.00 10. 11. Medical and dental expenses \$25.00 11. 12. Transportation. Include gas, maintenance, bus or train fare. \$250.00 12. Do not include car payments 13. Entertainment, clubs, recreation, newspapers, magazines, and books \$0.00 13. 14. Charitable contributions and religious donations \$0.00 14. 15. Insurance. Do not include insurance deducted from your pay or included in lines 4 or 20. 15a. Life insurance \$0.00 15a 15b. Health insurance \$0.00 15b 15c. Vehicle insurance \$144.00 15c 15d. Other insurance. Specify: \$0.00 15d 16. Taxes. Do not include taxes deducted from your pay or included in lines 4 or 20. \$0.00 16 17. Installment or lease payments: 17a. Car payments for Vehicle 1 \$0.00 17a 17b. Car payments for Vehicle 2 17b \$0.00 17c. Other. Specify: \$0.00 17c 17d. Other. Specify: \$0.00 17d 18. Your payments of alimony, maintenance, and support that you did not report as deducted from \$0.00 your pay on line 5, Schedule I, Your Income (Official Form 106l). 18. 19. Other payments you make to support others who do not live with you. Specify: \$0.00 19. 20.Other real property expenses not included in lines 4 or 5 of this form or on Schedule I: Your Income. 20a. Mortgages on other property \$0.00 20a 20b. Real estate taxes 20b. \$0.00 20b 20c. Property, homeowner's, or renter's insurance \$0.00 20c 20d. Maintenance, repair, and upkeep expenses 20d. \$0.00 20d 20e. Homeowner's association or condominium dues \$0.00 20e

| Debtor 1 | Anthon Case 16-156 | 17 Doc 1 | Filed 05/06/16 | Entered 05/06/16 (1474)4: | 37 De | esc Main | |
|-------------------|--------------------------------|-----------------------|-------------------------------|---------------------------|-------|----------|------------|
| | First Name | Middle Name | Documetnit ^{me} | Page 36 of 69 | | | |
| 21. Other. | Specify: | | | _ | 21 | = | \$0.00 |
| | | | | | | | |
| 22. Calcu | late your monthly expenses | S. | | | | | \$1,300.00 |
| 22a. A | dd lines 4 through 21. | | | | | | \$0.00 |
| 22b. C | opy line 22 (monthly expense | s for Debtor 2), if a | ny, from Official Form 106J | -2 | | | \$1,300.00 |
| 22c. A | dd line 22a and 22b. The resu | ılt is your monthly e | xpenses. | | 22. | | |
| 23. Calcul | ate your monthly net incor | ne. | | | | | |
| 23a. C | opy line 12 (your combined m | nonthly income) fror | m Schedule I. | | 23a | | \$1,725.16 |
| 23b. C | opy your monthly expenses fro | om line 22 above. | | | 23b | | \$1,300.00 |
| | ubtract your monthly expenses | | rincome. | | | | \$425.16 |
| ٦ | The result is your monthly net | income. | | | 23c | | |
| 24. Do yo | u expect an increase or de | crease in your ex | penses within the year af | ter you file this form? | | | |
| For e | xample, do you expect to finis | h naving for your ca | ar loan within the year or do | Woll expect your | | | |
| | gage payment to increase or o | . , . , | • | | | | |
| √ N | lo | | | | | | |
| | ´es | | | | | | |
| Ш' | es | | | | | | |
| | Explain here: | | | | | | |
| | | | | | | | |
| | | | | | | | |
| | | | | | | | |
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page 3

| | | Case 16-1561 | 7 Doc 1 Filed 0 | E/06/16 Ent | ered 05/06/16 17:14:37 | Doco Main |
|--------|---------------------------|--|-------------------------------|------------------------|--|-----------------------------------|
| Filli | in this inform | nation to identify your cas | | 3/00/10 = 111 | 21EH 153/U0/10 17.14.57 | Desc Main |
| Deb | otor 1 | Anthony | | LaCour | | |
| | | First Name | Middle Name | Last Name | | |
| | otor 2 ouse, if filing | First Name | Middle Name | Last Name | | |
| Uni | ted States Ba | ankruptcy Court for the: | Northern | District of Illinois | | |
| 0 | | , , | | (State) | | |
| | se number nown) | | | | | |
| Of | ficial F | Form 106De | <u>·C</u> | | | Check if this is a amended filing |
| De | clarat | ion About a | n Individual De | btor's Sch | edules | 12/1 |
| If two | o married p | eople are filing togethe | er, both are equally responsi | ble for supplying co | rrect information. | |
| | t 1: Sign | | eone who is NOT an attorney | to help you fill out b | ankruptcy forms? | |
| | ✓ No | | | | | |
| | Yes. N | Name of person | | _ | ıptcy Petition Preparer's Notice, Decla iicial Form 119). | aration, and |
| × | • | nre true and correct. ny LaCour f Debtor 1 | e that I have read the summa | ×_ | nature of Debtor 2 | |
| | | DD/YYYY | | Da | MM/DD/YYYY | |

| Fill in this | Case 16-1561 information to identify your ca | 7 Doc 1 | Filed 05/06/16 | Entered 05/ | <u>0</u> 6/16 17:14:37 | Desc Main |
|------------------------|--|---------------------------|------------------------------|------------------|------------------------|--|
| Debtor 1 | Anthony | | LaCour | | | |
| Debtor 2 | First Name | Middle i | Name Last Nar | ne | | |
| (Spouse, | if filing) First Name | Middle I | Name Last Nar | ne | | |
| United Sta | ates Bankruptcy Court for the: | Northern | District of Illing (Sta | | | |
| Case num (If known) | nber | | | | | |
| Offici | al Form 107 | | | | <u></u> | Check if this is a amended filing |
| | ment of Financ | ial Affairs | for Individua | ls Filina | for Bankrup | tcv 12/1 |
| space is n | | eet to this form. On | the top of any additional | pages, write you | | olying correct information. If more oer (if known). Answer every question |
| 1. WI | hat is your current marital s | tatus? | | | | |
| <u></u> | Married Not married | | | | | |
| 2. Du | ıring the last 3 years, have y | ou lived anywhere o | other than where you live | now? | | |
| <u> </u> | No Yes. List all of the places you | ı lived in the last 3 yea | ars. Do not include where yo | u live now. | | |
| | Debtor 1: | | Dates Debtor 1 lived there | Debtor 2: | | Dates Debtor 2 lived there |
| | | | | Same as [| Debtor 1 | Same as Debtor 1 |
| | Number Street | | From | Number Stree | et | From |
| | | | _ To | | | To |
| | City State | Zip Code | _ | City | State Zip | Code |
| | | | | Same as D | Debtor 1 | Same as Debtor 1 |
| | Number Street | | - From | Number Stree | et . | From |
| | | | _ To | | | To |
| | | | _ | City | State Zip | |
| | City State | Zip Code | | | | Code |

Debtor 1 Anthon Case 16-15617
First Name

 Doc 1
 Filed 05/06/16
 Entered 05/06/16 (1.7%) 14:37
 Desc Main

 Middle Name
 Document 11 (1.2%)
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| | Did you have any income from employmen Fill in the total amount of income you received that activities. If you are filing a joint case and you ha | from all jobs and all businesses | , including part-time | | ? | | |
|--------|---|--|--|--|--|--|--|
| | No | | | | | | |
| | Yes. Fill in the details. | | | | | | |
| | | Debtor 1 | | Debtor 2 | | | |
| | | Sources of income Check all that apply. | Gross income (before deductions and exclusions) | Sources of income Check all that apply. | Gross income (before deductions and exclusions) | | |
| | From January 1 of current year until the date you filed for bankruptcy: | Wages, commissions, bonuses, tips Operating a business | | Wages, commissions, bonuses, tips Operating a business | | | |
| | | ✓ Wages, commissions, | # 0000 00 | Wages, commissions, | | | |
| | For last calendar year: (January 1 to December 31, | bonuses, tips Operating a business | \$8000.00 | bonuses, tips Operating a business | | | |
| | For the calendar year before that: (January 1 to December 31, | Wages, commissions, bonuses, tips Operating a business | \$5000.00 | Wages, commissions, bonuses, tips Operating a business | | | |
| L [| ist each source and the gross income from each | ch source separately. Do not inc | lude income that you listed i | n line 4. | | | |
| [| Yes. Fill in the details. | | | | | | |
| | | Debtor 1 | | Debtor 2 | Debtor 2 | | |
| | | Sources of income Describe below. | Gross income from | Sources of income | | | |
| | | | each source (before deductions and exclusions) | Describe below. | Gross income from each source (before deductions and exclusions) | | |
| | | LINK | (before deductions and | Describe below. | each source (before deductions and | | |
| | From January 1 of current year until | LINK Workers Comp | (before deductions and exclusions) | Describe below. | each source (before deductions and | | |
| | From January 1 of current year until the date you filed for bankruptcy: | | (before deductions and exclusions) \$635.00 | Describe below. | each source (before deductions and | | |
| | the date you filed for bankruptcy: | Workers Comp | (before deductions and exclusions) \$635.00 \$303.00 | Describe below. | each source (before deductions and | | |
| | the date you filed for bankruptcy: For last calendar year: | Workers Comp SSI | (before deductions and exclusions) \$635.00 \$303.00 \$4,215.00 | Describe below. | each source (before deductions and | | |
| | the date you filed for bankruptcy: | Workers Comp SSI LINK | (before deductions and exclusions) \$635.00 \$303.00 \$4,215.00 | Describe below. | each source (before deductions and | | |
| | the date you filed for bankruptcy: For last calendar year: (January 1 to December 31, | Workers Comp SSI LINK Workers Comp | (before deductions and exclusions) \$635.00 \$303.00 \$4,215.00 \$192.00 \$8,996.00 | Describe below. | each source (before deductions and | | |
| | For last calendar year: (January 1 to December 31, | Workers Comp SSI LINK Workers Comp SSI | (before deductions and exclusions) \$635.00 \$303.00 \$4,215.00 \$192.00 \$8,996.00 \$10,116.00 | Describe below. | each source (before deductions and | | |

| either Debtor 1's o | r Debtor 2's o | debts primarily cor | sumer debts? | | | |
|---------------------------|----------------|--|---------------------------|---|-------------------------------|-------------------------------|
| | | or 2 has primarily of sehold purpose." | consumer debts. Con | sumer debts are defined in | 11 U.S.C. § 101(8) as "incurr | ed by an individual primarily |
| During the 90 (| days before yo | u filed for bankruptcy | , did you pay any credit | or a total of \$6,425* or more | ? | |
| No. Go to | line 7. | | | | | |
| tota | l amount you բ | paid that creditor. Do | not include payments f | more in one or more paym or domestic support obliga n attorney for this bankrupto | ions, such as | |
| * Subject to ad | ustment on 4/ | 01/19 and every 3 ye | ears after that for cases | filed on or after the date of | adjustment. | |
| Yes. Debtor 1 or D | ebtor 2 or bo | oth have primarily | consumer debts. | | | |
| During the 90 (| days before yo | u filed for bankruptcy | , did you pay any credito | or a total of \$600 or more? | | |
| ✓ No. Go to | | ,, | , , , , | | | |
| | | aditor to whom you | said a total of PCOO or m | are and the total amount ve | naid | |
| | | | | ore and the total amount yo bligations, such as child su | | |
| | | | to an attorney for this b | | FF | |
| | | | Dates of payment | Total amount paid | Amount you still owe | Was this payment for |
| Creditor's Name | | | - | _ | _ | Mortgage |
| | | | <u>-</u> | | | Car |
| Number Street | | | | | | Credit card |
| | | | - | | | Loan repayment Suppliers or |
| City | State | Zip Code | - | | | vendors |
| | | | | | | Other |
| Creditor's Name | | | | _ | | Mortgage |
| Number Street | | | - | | | Car Credit card |
| - Otreet | | | _ | | | Loan repayment |
| | | | | | | Suppliers or |
| City | State | Zip Code | | | | vendors |
| | | | | _ | | Other |
| Creditor's Name | | | • | | | ─ |
| Number Street | | | - | | | Credit card |
| | | | - | | | Loan repayment |
| City | | | | | | Suppliers or |
| | State | Zip Code | - | | | vendors |

Anthon Case 16-15617 Doc 1 Filed 05/06/16 Entered 05/06/16 147:14:37 Desc Main Debtor 1 Document Page 41 of 69 Within 1 year before you filed for bankruptcy, did you make a payment on a debt you owed anyone who was an insider? Insiders include your relatives; any general partners; relatives of any general partners; partnerships of which you are a general partner; corporations of which you are an officer, director, person in control, or owner of 20% or more of their voting securities; and any managing agent, including one for a business you operate as a sole proprietor. 11 U.S.C. § 101. Include payments for domestic support obligations, such as child support and alimony. Yes. List all payments to an insider. Dates of Total amount paid Amount you still Reason for this payment payment owe Insider's Name Number Street City State Zip Code Insider's Name Number Street City State Zip Code Within 1 year before you filed for bankruptcy, did you make any payments or transfer any property on account of a debt that benefited an Include payments on debts guaranteed or cosigned by an insider. Yes. List all payments that benefited an insider. Dates of Total amount paid Amount you still Reason for this payment payment owe Include creditor's name Insider's Name Number Street City State Zip Code Insider's Name Number Street City State Zip Code

Debtor 1 Anthon Case 16-15617
First Name Filed 05/06/16 Entered 05/06/16 (1/7):14:37 Desc Main Doc 1

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Part 4: Identify Legal Actions, Repossessions, and Foreclosures

| | such matters, includ | filed for bankruptcy, wing personal injury cases | | | | | | tody modifications, | and contract |
|-----|---|--|----------|---------------------|--------------------|--------|----------|---------------------|--------------|
| ✓ N | lo es. Fill in the details. | | | | | | | | |
| | | | Nature o | of the case | Court or age | ncy | | Status of the ca | se |
| | Case title | | | | | | | Pending | |
| | | | | | Court Name | | | On appeal | |
| | Case number | | | | Number Stree | t | | Concluded | |
| | | | | | City | State | Zip Code | • | |
| | Case title | | | | | | | Pending | |
| | | | | | Court Name | | | · = | |
| | Case number | | | | Courtivanie | | | On appeal | |
| | | | | | Number Stree | t | | Concluded | |
| | | | | | City | State | Zip Code | • | |
| ä | Yes. Fill in the inform Creditor's Name Number Street | ation below. | | Describe the proper | | | Date | Value of t property | he |
| | | | | Property was repo | ossessed. | | | | |
| | | | | Property was fore | | | | | |
| | | | | Property was gar | | | | | |
| | City | State Zip Co | ode | Property was atta | ched, seized, or l | evied. | | | |
| | | | | Describe the proper | ty | | Date | Value of t property | he |
| | | | | | | | | | |
| | Creditor's Name | | | | | | | | |
| | Number Street | | | Explain what happe | ned | | | | |
| | number Street | | | Property was repo | necessed | | | | |
| | | | | Property was fore | | | | | |
| | | | | Property was gar | | | | | |
| | City | State Zip Co | ode | Property was atta | | evied. | | | |
| | , | p 0 | | _ · ′ | • | | | | |

| Deb | tor 1 | Anthon Case 16-15617 First Name | | <u>d 05/06/16 Entered </u> 05/06/16 <i>1</i> ଜନ ା 4: cumeମୀ୍ଲ Page 43 of 69 | :37 Desc | <u>Main</u> |
|------|----------|--|-----------------------|---|--------------------------|-------------------------|
| 11. | | nin 90 days before you filed for ounts or refuse to make a paym No | | creditor, including a bank or financial institution, set of | ff any amounts fr | om your |
| | | Yes. Fill in the details. | | | | |
| | | | | Describe the action the creditor took | Date action was taken | Amount |
| | | Creditor's Name | | | | |
| | | | | | 1 | |
| | | Number Street | | | | |
| | | | | Last 4 digits of account number: XXXX- | | |
| | | City State | Zip Code | | | |
| 12. | | iin 1 year before you filed for b iver, a custodian, or another o | | your property in the possession of an assignee for the | e benefit of credi | tors, a court-appointed |
| | <u> </u> | No | | | | |
| | <u>⊔</u> | Yes | | | | |
| Part | 5: | List Certain Gifts and Co | ontributions | | | |
| 13. | Wit | thin 2 years before you filed fo | r bankruptcy, did you | give any gifts with a total value of more than \$600 per | person? | |
| | ✓ | No | | | | |
| | | Yes. Fill in the details for each g | gift. | | | |
| | | Gifts with a total value of mor per person | re than \$600 | Describe the gifts | Dates you gave the gifts | Value |
| | | Person to Whom You Gave the G | 2: (t | | | |
| | | - I disortio vinorii red cave tre c | | | | |
| | | | | | | |
| | | Number Street | | | | |
| | | City State | Zip Code | | | |
| | | Person's relationship to you | | | | |
| | | Person to Whom You Gave the G | Gift | | | |
| | | | | | | |
| | | Number Street | | | | |
| | | City State | Zip Code | | | |
| | | Person's relationship to you | | | | |
| | | | | | | |

| | | FIRST Name | IVIIC | dale Name DO | ocumente Page 44 of 69 | | |
|-------------|----------|---|------------------|--------------------|--|-----------------------------------|------------------------|
| 14. | With | nin 2 years before yo | u filed for bar | | give any gifts or contributions with a total value of mor | e than \$600 to an | ny charity? |
| | | No Yes. Fill in the details | for each gift or | contribution. | | | |
| | _ | Gifts with a total val | - | | Describe the gifts | Dates you gave the gifts | Value |
| | | Charity's Name | | | | | |
| | | | | | | | |
| | | Number Street | | | | | |
| Dont | <u>.</u> | · | State | Zip Code | | | |
| Part 15. | | List Certain Loss | | ruptcy or since y | ou filed for bankruptcy, did you lose anything because | of theft, fire, othe | r disaster, or |
| | gam | bling? | | . , , | , , , , , | , , | , |
| | | No Yes. Fill in the details. | | | | | |
| | | Describe the proper how the loss occurr | | ıd | Describe any insurance coverage for the loss Include the amount that insurance has paid. List pending | Date of your loss | Value of property lost |
| | | | | | insurance claims on line 33 of Schedule A/B: Property. | | |
| Dovi | | iot Cortoin Boum | onto or Tr | anafara | | | |
| Part 16. | | List Certain Paym | | | anyone else acting on your behalf pay or transfer any | property to anyor | ne vou consulted about |
| | seek | ing bankruptcy or pr | eparing a bar | nkruptcy petition? | | | , |
| | | No Yes. Fill in the details. | | | | | |
| | | | | | Description and value of any property transferred | Date payment or transfer was made | Amount of payment |
| | | Semrad Law Firm | | | Attorney's Fee - 350.00 | 5/6/2016 | \$350.00 |
| | | Person Who Was Paid | | _ | | | |
| | | 20 South Clark Street Number Street | 28th Floor | | | | |
| | | Number Street | | | | | |
| | | | Illinois | 60606 | | | |
| | | | State | Zip Code | | | |
| | | Email or website addr Person Who Made the | | at Vari | | | |
| | | | - | ot fou | | | |
| | | Person Who Was Paid | d | | | | |
| | | Number Street | | | | | |
| | | City | State | Zip Code | | | |
| | | Email or website addr | ress | | | | |
| | | Person Who Made the | e Payment, if N | ot You | | | |

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| ¥ | No Yes. Fill in the details. | | | | | |
|-----|---|---|----------------------------|---|------------|------------------------|
| | | Description and value of any p | property transferred | Date payment or transfer was made | Amount | of paymer |
| | Person Who Was Paid | | | | | |
| | Number Street | | | | | |
| | City State Zip C | Code | | | | |
| Inc | dinary course of your business or financial clude both outright transfers and transfers made nsfers that you have already listed on this stater No Yes. Fill in the details. | e as security (such as the granting of a security | y interest or mortgage on | your property). Do | not includ | e gifts and |
| | | Description and value of any property transferred | | property or payments but be paid in exchain a comment of the paid in exchain a comment of the part of | | Date trans vas made |
| | Person Who Received Transfer | | | | _ | |
| | Number Street | | | | | |
| | City State Zip C Person's relationship to you | Code | | | | |
| | Person Who Received Transfer | | | | _ | |
| | Number Street | | | | | |
| | City State Zip C Person's relationship to you | Code | | | | |
| | ithin 10 years before you filed for bankruptonese are often called asset-protection devices.) | cy, did you transfer any property to a self-se | ettled trust or similar de | vice of which you | ı are a be | neficiary? |
| | | 5 12 1 1 6 | property transferred | | | Date trans |
| (Tł | Yes. Fill in the details. | Description and value of the p | property transferred | | v | vas made |

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| | i iist ivaille | Wilder Name | Document" | Page 46 of 69 | |
|---------|-----------------------------------|---------------|------------------|------------------------|----------|
| Part 8: | List Certain Financial Acc | counts, Instr | uments, Safe Dep | osit Boxes, and Storag | je Units |

| 20. | or tra | nin 1 year before you filed for bankruptcy, were ansferred? de checking, savings, money market, or other finan eratives, associations, and other financial institution | icial accounts; certificates of deposit; | | | | |
|-----|----------|---|--|-----------------|---------------------------|---|---|
| | | No Yes. Fill in the details. | | | | | |
| | | | Last 4 digits of account number | Type of instrum | account or ent | Date account was closed, sold, moved, or transferred | Last balance before closing or transfer |
| | | Person Who Was Paid | XXXX- | Che | cking ings | | |
| | | Number Street | | = | ey market kerage er | | |
| | | City State Zip Code | <u> </u> | | | | |
| | | Person Who Was Paid | — XXXX- | Che | cking ings | | |
| | | Number Street | | | ey market kerage | | |
| | | | | Othe | er | | |
| | | City State Zip Code | | | | | |
| 21. | valu | you now have, or did you have within 1 year befables? No Yes. Fill in the details. | fore you filed for bankruptcy, any s | safe deposit | box or other depositor | ry for securities, | |
| | | | Who else had access to it? | | Describe the contents | • | Do you still have it? |
| | | Name of Financial Institution | Name | | | | ☐ No ☐ Yes |
| | | Number Street | Number Street | | | | 100 |
| | | 01 | City State Zi | ip Code | | | |
| 22. | Have | City State Zip Code e you stored property in a storage unit or place | other than your home within 1 ve | ar hefore v | ou filed for hankruntov | 2 | |
| | ✓ | No Yes. Fill in the details. | one than you nome want i ye | ai belole ye | ou med for bank apicy | • | |
| | | | Who else had access to it? | | Describe the contents | 3 | Do you still have it? |
| | | Name of Storage Facility | Name | | | | ☐ No |
| | | Number Street | Number Street | | | | Yes |
| | | | City State Zi | ip Code | | | |
| | | City State Zip Code | | | | | |

| Deb | tor 1 | First Name Middle Name | Filed 05/6 Docume | init ^{me} Paç | ntered | % 1.6 | <u>n</u> |
|------|-------------------------|--|----------------------|------------------------|--------------------|--|------------------|
| Part | 9: | Identify Property You Hold or Contro | I for Someo | ne Else | | | |
| 23. | Doy | you hold or control any property that someone | e else owns? Ir | nclude any pro | perty you borro | owed from, are storing for, or hold in tru | ust for someone. |
| | $\overline{\mathbf{A}}$ | No State of the st | | | | | |
| | Ш | Yes. Fill in the details. | Where is the | e property? | | Describe the contents | Value |
| | | | Where is the | e property: | | bescribe the contents | Value |
| | | Owner's Name | Number Stre | eet | | _ | |
| | | Number Street | | | | - | |
| | | | | | | _ | |
| | | | City | State | Zip Code | | |
| | | City State Zip Code | _ | | | | |
| Part | 10: | Give Details About Environmental In | formation | | | | |
| For | the p | urpose of Part 10, the following definitions apply: | | | | | |
| | ■ E | nvironmental law means any federal, state, or loca | l statute or regul | ation concernin | g pollution, conta | mination, releases of | |
| | ha | azardous or toxic substances, wastes, or material in | nto the air, land, | soil, surface wa | ater, groundwater | | |
| | | cluding statutes or regulations controlling the clear | | | | | |
| | | ite means any location, facility, or property as define used to own, operate, or utilize it, including dispo | • | vironmental law, | whether you now | own, operate, or utilize it | |
| | | lazardous material means anything an environment | | s a hazardous w | aste. hazardous s | substance. | |
| | | xic substance, hazardous material, pollutant, conta | | | , | , | |
| Rep | oort al | I notices, releases, and proceedings that you know | about, regardle | ss of when they | occurred. | | |
| | | | | | | | |
| 24. | Has | any governmental unit notified you that you r | may be liable o | r potentially lia | able under or in | violation of an environmental law? | |
| | | No | | | | | |
| | ш | Yes. Fill in the details. | Governmen | tal unit | | Environmental law, if you know it | Date of notice |
| | | | Ooverninen | tai aint | | Environmentariaw, ii you know it | Date of flotice |
| | | Name of site | Governmenta | al unit | | _ | |
| | | Number Street | Number Stre | et | | _ | |
| | | | | | | _ | |
| | | | City | State | Zip Code | | |
| | | City State Zip Code | _ | | | | |
| 25. | Hav | e you notified any governmental unit of any re | alease of hazar | dous material | 2 | | |
| _0. | - III | | Sicuse of Huzur | aous material | • | | |
| | 씜 | No Yes. Fill in the details. | | | | | |
| | ш | Too. This is the detaile. | Governmen | tal unit | | Environmental law, if you know it | Date of notice |
| | | | | | | | |
| | | Name of site | Governmenta | al unit | | | |
| | | Number Street | Number Stre | et | | - | |
| | | | - - | | | _ | |
| | | | City | State | Zip Code | | |
| | | City State Zip Code | _ | | | | |
| | | | | | | | |

| Debte | or 1 | Anthon Case 16-156 First Name | 17 Doc 1 F | <u>-iled 05/06/16</u> Documenter | Entered 05/06 Page 48 of 69 | h16 (14.76) 14: <u>37</u> | <u>Desc Main</u> |
|-------|----------|--|----------------------------|-------------------------------------|----------------------------------|----------------------------------|---|
| 26. | Hav | e you been a party in any j | udicial or administra | tive proceeding under a | any environmental law | ? Include settlements | and orders. |
| | | No | | | | | |
| | ш | Yes. Fill in the details. | | Court or agency | | Nature of the case | Status of the |
| | | Case title | | | | | case |
| | | | | Court Name | | | Pending |
| | | | | | | | On appeal |
| | | Case number | | Number Street | | | Concluded |
| | | _ | | City State | Zip Code | | |
| Part | 11: | Give Details About Yo | our Business or | Connections to An | y Business | | |
| 27. | With | nin 4 years before you filed | for bankruptcy, did y | ou own a business or | have any of the follow | ing connections to any | business? |
| | | A sole proprietor or self- | employed in a trade, p | profession, or other activity | y, either full-time or part- | time | |
| | | | | or limited liability partners | ship (LLP) | | |
| | | A partner in a partnersh An officer, director, or m | | a corporation | | | |
| | | An owner of at least 5% | of the voting or equity | securities of a corporatio | n | | |
| | ✓ | No. None of the above applie | | | | | |
| | Ш | Yes. Check all that apply abo | ve and fill in the details | | ure of the business | Employer Ide | entification number Do not |
| | | | | Docorido tiro ria | | | al Security number or ITIN. |
| | | Business Name | | | | EIN: | |
| | | Number Street | | Name of accoun | Name of accountant or bookkeeper | | ss existed |
| | | City State | Zip Code | — | - | | То |
| | | City | 219 0000 | | | | _ |
| | | | | Describe the not | ure of the business | Employer Ide | entification number Do not |
| | | | | Describe the nat | ure or trie business | | entification number Do not al Security number or ITIN. |
| | | Business Name | | | | EIN: | |
| | | Number Street | | Name of accoun | tant or bookkeeper | Dates busine | ss existed |
| | | City State | Zip Code | — | tant of bookkeeper | From | To |
| | | City Citato | 2.10 0000 | | | | <u> </u> |
| | | | | Describe the not | ure of the business | Employer Ide | entification number Do not |
| | | | | Describe the nat | ure of the business | | al Security number or ITIN. |
| | | Business Name | | | | EIN: | |
| | | Number Street | | | | Dates busine | ss existed |
| | | | | Name of accoun | tant or bookkeeper | | _ |
| | | City State | Zip Code | | | From | To |
| | | | | | | | |
| | | | | | | | |

| Debtor 1 | | <u>ed 05/06/16 Entered </u> 05/06/16 /147/14: <u>37 Desc Main</u> Docum ^e tit ^{re} Page 49 of 69 |
|----------|---|---|
| | | u give a financial statement to anyone about your business? Include all financial institutions, |
| ✓ | No Yes. Fill in the details below. | |
| _ | • | Date issued |
| | Name | MM/DD/YYYY |
| | Number Street | _ |
| | City State Zip Code | <u>—</u> |
| Part 12: | Sign Below | |
| and | correct. I understand that making a false statement | Affairs and any attachments, and I declare under penalty of perjury that the answers are true it, concealing property, or obtaining money or property by fraud in connection with a inprisonment for up to 20 years, or both. 18 U.S.C. §§ 152, 1341, 1519, and 3571. |
| | Signature of Debtor 1 | Signature of Debtor 2 |
| | Date 5/6/2016 | Date |
| Did | you attach additional pages to Your Statement of F No Yes | Financial Affairs for Individuals Filing for Bankruptcy (Official Form 107)? |
| Did | you pay or agree to pay someone who is not an atto | orney to help you fill out bankruptcy forms? |
| ✓ | No | |
| | Yes. Name of person | Attach the Bankruptcy Petition Preparer's Notice, Declaration, and Signature (Official Form 119). |

B 203 (12/94)

In

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UNITED STATES BANKRUPTCY COURT

Northern District of Illinois

| re | Anthony LaCour | Case No. | |
|----|--|--|-----------------------------|
| _ | Debtor | | (If known) |
| | | Chapter | Chapter 13 |
| | DISCLOSURE OF COMPENSAT | ION OF ATTORNEY FOR | R DEBTOR |
| 1. | Pursuant to 11 U.S.C. § 329(a) and Fed. Bankr. P. 2016(b), compensation paid to me within one year before the filing or rendered or to be rendered on behalf of the debtor(s) in con | f the petition in bankruptcy, or agreed to | be paid to me, for services |
| | For legal services, I have agreed to accept | | \$4,000.00 |
| | Prior to the filing of this statement I have received | | \$350.00 |
| | Balance Due | | \$3,650.00 |
| 2. | The source of the compensation paid to me was: | | |
| | Debtor Other (spec | cify) | |
| 3. | The source of the compensation paid to me is: | | |
| | Debtor Other (spec | cify) | |
| 4. | I have not agreed to share the above-disclosed comper members and associates of my law firm. | nsation with any other person unless the | y are |
| | I have agreed to share the above-disclosed compensation members or associates of my law firm. A copy of the atthe people sharing in the compensation, is attached. | | |
| 5. | In return for the above-disclosed fee, I have agreed to rend a. Analysis of the debtor's financial situation, and rende bankruptcy; | | |
| | b. Preparation and filing of any petition, schedules, sta | tements of affairs and plan which may b | pe required; |
| | c. Representation of the debtor at the meeting of credit | ors and confirmation hearing, and any a | djourned hearings thereof; |

d. Representation of the debtor in adversary proceedings and other contested bankruptcy matters;

| | CERTIFICATION | |
|---|--|--|
| I certify that the foregoing is a complete sthe debtor(s) in this bankruptcy proceedings. | tatement of any agreement or arrangement for payment to me for representation of | |
| 5/6/2016 | /s/ Daniel Giannola | |

Signature of Attorney

Semrad Law Firm

Name of law firm

Case 16-15617 Doc 1 Filed 05/06/16 Entered 05/06/16 17:14:37 Desc Main Document Page 51 of 69 Goldward By agreement with the debtor(s), the above-disclosed fee does not include the following services:

Date

Notice Required by 11 U.S.C. § 342(b) for Individuals Filing for Bankruptcy (Form 2010)

This notice is for you if:

You are an individual filing for bankruptcy,

and

Your debts are primarily consumer debts.

Consumer debts are defined in 11 U.S.C. § 101(8) as "incurred by an individual primarily for a personal, family, or household purpose."

The types of bankruptcy that are available to individuals

Individuals who meet the qualifications may file under one of four different chapters of the Bankruptcy Code:

- Chapter 7 Liquidation
- Chapter 11 Reorganization
- Chapter 12 Voluntary repayment plan for family farmers or fishermen
- Chapter 13 Voluntary repayment plan for individuals with regular income

You should have an attorney review your decision to file for bankruptcy and the choice of chapter.

Chapter 7: Liquidation

| | \$245 | filing fee |
|---|-------|--------------------|
| | \$75 | administrative fee |
| + | \$15 | trustee surcharge |
| | \$335 | total fee |

Chapter 7 is for individuals who have financial difficulty preventing them from paying their debts and who are willing to allow their nonexempt property to be used to pay their creditors. The primary purpose of filing under chapter 7 is to have your debts discharged. The bankruptcy discharge relieves you after bankruptcy from having to pay many of your pre-bankruptcy debts. Exceptions exist for particular debts, and liens on property may still be enforced after discharge. For example, a creditor may have the right to foreclose a home mortgage or repossess an automobile.

However, if the court finds that you have committed certain kinds of improper conduct described in the Bankruptcy Code, the court may deny your discharge.

You should know that even if you file chapter 7 and you receive a discharge, some debts are not discharged under the law. Therefore, you may still be responsible to pay:

- most taxes;
- most student loans;
- domestic support and property settlement obligations;

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- most fines, penalties, forfeitures, and criminal restitution obligations; and
- certain debts that are not listed in your bankruptcy papers.

You may also be required to pay debts arising from:

- fraud or theft;
- fraud or defalcation while acting in breach of fiduciary capacity;
- intentional injuries that you inflicted; and
- death or personal injury caused by operating a motor vehicle, vessel, or aircraft while intoxicated from alcohol or drugs.

If your debts are primarily consumer debts, the court can dismiss your chapter 7 case if it finds that you have enough income to repay creditors a certain amount. You must file *Chapter 7 Statement of Your Current Monthly Income* (Official Form 122A–1) if you are an individual filing for bankruptcy under chapter 7. This form will determine your current monthly income and compare whether your income is more than the median income that applies in your state.

If your income is not above the median for your state, you will not have to complete the other chapter 7 form, the *Chapter 7 Means Test Calculation* (Official Form 122A–2).

If your income is above the median for your state, you must file a second form — the Chapter 7 Means Test Calculation (Official Form 122A-2). The calculations on the form— sometimes called the Means Test —deduct from your income living expenses and payments on certain debts to determine any amount available to pay unsecured creditors. If

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your income is more than the median income for your state of residence and family size, depending on the results of the *Means Test*, the U.S. trustee, bankruptcy administrator, or creditors can file a motion to dismiss your case under § 707(b) of the Bankruptcy Code. If a motion is filed, the court will decide if your case should be dismissed. To avoid dismissal, you may choose to proceed under another chapter of the Bankruptcy Code.

If you are an individual filing for chapter 7 bankruptcy, the trustee may sell your property to pay your debts, subject to your right to exempt the property or a portion of the proceeds from the sale of the property. The property, and the proceeds from property that your bankruptcy trustee sells or liquidates that you are entitled to, is called *exempt property*. Exemptions may enable you to keep your home, a car, clothing, and household items or to receive some of the proceeds if the property is sold.

Exemptions are not automatic. To exempt property, you must list it on *Schedule C: The Property You Claim as Exempt* (Official Form 106C). If you do not list the property, the trustee may sell it and pay all of the proceeds to your creditors.

Chapter 11: Reorganization

| | \$1,167 | filing fee |
|---|---------|--------------------|
| + | \$550 | administrative fee |
| | \$1,717 | total fee |

Chapter 11 is often used for reorganizing a business, but is also available to individuals. The provisions of chapter 11 are too complicated to summarize briefly.

Read These Important Warnings

Because bankruptcy can have serious long-term financial and legal consequences, including loss of your property, you should hire an attorney and carefully consider all of your options before you file. Only an attorney can give you legal advice about what can happen as a result of filing for bankruptcy and what your options are. If you do file for bankruptcy, an attorney can help you fill out the forms properly and protect you, your family, your home, and your possessions.

Although the law allows you to represent yourself in bankruptcy court, you should understand that many people find it difficult to represent themselves successfully. The rules are technical, and a mistake or inaction may harm you. If you file without an attorney, you are still responsible for knowing and following all of the legal requirements.

You should not file for bankruptcy if you are not eligible to file or if you do not intend to file the necessary documents.

Bankruptcy fraud is a serious crime; you could be fined and imprisoned if you commit fraud in your bankruptcy case. Making a false statement, concealing property, or obtaining money or property by fraud in connection with a bankruptcy case can result in fines up to \$250,000, or imprisonment for up to 20 years, or both. 18 U.S.C. §§ 152, 1341, 1519, and 3571.

Chapter 12: Repayment plan for family farmers or fishermen

| | \$200 | filing fee |
|---|-------|--------------------|
| + | \$75 | administrative fee |
| | \$275 | total fee |

Similar to chapter 13, chapter 12 permits family farmers and fishermen to repay their debts over a period of time using future earnings and to discharge some debts that are not paid.

Chapter 13: Repayment plan for individuals with regular income

| | \$235 | filing fee |
|---|-------|--------------------|
| + | \$75 | administrative fee |
| | \$310 | total fee |

Chapter 13 is for individuals who have regular income and would like to pay all or part of their debts in installments over a period of time and to discharge some debts that are not paid. You are eligible for chapter 13 only if your debts are not more than certain dollar amounts set forth in 11 U.S.C. § 109.

Under chapter 13, you must file with the court a plan to repay your creditors all or part of the money that you owe them, usually using your future earnings. If the court approves your plan, the court will allow you to repay your debts, as adjusted by the plan, within 3 years or 5 years, depending on your income and other factors.

After you make all the payments under your plan, many of your debts are discharged. The debts that are not discharged and that you may still be responsible to pay include:

- domestic support obligations,
- most student loans,
- certain taxes,
- debts for fraud or theft,
- debts for fraud or defalcation while acting in a fiduciary capacity,
- most criminal fines and restitution obligations,
- certain debts that are not listed in your bankruptcy papers,
- certain debts for acts that caused death or personal injury, and
- certain long-term secured debts.

Warning: File Your Forms on Time

Section 521(a)(1) of the Bankruptcy Code requires that you promptly file detailed information about your creditors, assets, liabilities, income, expenses and general financial condition. The court may dismiss your bankruptcy case if you do not file this information within the deadlines set by the Bankruptcy Code, the Bankruptcy Rules, and the local rules of the court

For more information about the documents and their deadlines, go to:

http://www.uscourts.gov/bkforms/bankruptcy_forms.html#procedure.

Bankruptcy crimes have serious consequences

- If you knowingly and fraudulently conceal assets or make a false oath or statement under penalty of perjury—either orally or in writing—in connection with a bankruptcy case, you may be fined, imprisoned, or both.
- All information you supply in connection with a bankruptcy case is subject to examination by the Attorney General acting through the Office of the U.S. Trustee, the Office of the U.S. Attorney, and other offices and employees of the U.S. Department of Justice.

Make sure the court has your mailing address

The bankruptcy court sends notices to the mailing address you list on *Voluntary Petition for Individuals Filing for Bankruptcy* (Official Form 101). To ensure that you receive information about your case, Bankruptcy Rule 4002 requires that you notify the court of any changes in your address.

A married couple may file a bankruptcy case together - called a *joint case*. If you file a joint case and each spouse lists the same mailing address on the bankruptcy petition, the bankruptcy court generally will mail you and your spouse one copy of each notice, unless you file a statement with the court asking that each spouse receive separate copies.

Understand which services you could receive from credit counseling agencies

The law generally requires that you receive a credit counseling briefing from an approved credit counseling agency. 11 U.S.C. § 109(h). If you are filing a joint case, both spouses must receive the briefing. With limited exceptions, you must receive it within the 180 days **before** you file your bankruptcy petition. This briefing is usually conducted by telephone or on the Internet.

In addition, after filing a bankruptcy case, you generally must complete a financial management instructional course before you can receive a discharge. If you are filing a joint case, both spouses must complete the course.

You can obtain the list of agencies approved to provide both the briefing and the instructional course from:

http://www.justice.gov/ust/eo/hapcpa/ccde/cc_approved.html

In Alabama and North Carolina, go to: http://www.uscourts.gov/FederalCourts/Bankruptcy/BankruptcyResources/ApprovedCredit 20AndDebtCounselors.aspx

If you do not have access to a computer, the clerk of the bankruptcy court may be able to help you obtain the list.

Case 16-15617 Doc 1 Filed 05/06/16 Entered 05/06/16 17:14:37 Desc Main UNITED STATES BANKBURG COURT Northern District of Illinois

| In re: | LaCour, Anthony | Case No | | |
|--------|---|---|-----|--|
| | Debtor(s) | | | |
| | | Chapter. Chapter13 | | |
| | VERIFICATION OF CREDITOR MATRIX | | | |
| | The above named Debtors hereby verify that th | e attached list of creditors is true and correct to the best of their knowled | ge. | |
| | | | | |
| Date: | 5/6/2016 | /s/ LaCour, Anthony | | |
| | | LaCour, Anthony | | |

Signature of Debtor

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WFDS PO BOX 19657 IRVINE , CA 92623 USA

Santander Consumer USA PO Box 961245 Fort Worth , TX 76161 USA

PEOPLES ENGY 200 EAST RANDOLPH CHICAGO , IL 60601 USA

FST PREMIER 3820 N LOUISE AVE SIOUX FALLS, SD 57107 USA

AD ASTRA RECOVERY SERV 7330 W 33RD ST N STE 118 WICHITA , KS 67205 USA

CONVERGENT OUTSOURCING 800 SW 39TH ST RENTON, WA 98057 USA

City of Chicago Parking 121 N. LaSalle St # 107A Chicago , IL 60602 USA

ComEd 3 Lincoln Center Bankruptcy Section Oakbrook Terrace , IL 60181 USA

VERIZON NATIONAL RECOVERY P.O. BOX 26055 MINNEAPOLIS , MN 55426 USA

TMobile P.O. Box 742596 Cincinnati , OH 45274

Check 'N Go 5638 W Fullerton Chicago , IL 60639 USA

check into Cash 1637 S. Cicero Cicero , IL 60804 USA Case 16-15617 Doc 1 Filed 05/06/16 Entered 05/06/16 17:14:37 Desc Main & Carey Document Page 58 of 69

Carey & Carey 13004 Western Ave, Blue Island , IL 60406 USA

University of Chicago Medicine 15965 Collections Center Dr Chicago , IL 60693 USA

UNITED STATES BANKRUPTCY COURT NORTHERN DISTRICT OF ILLINOIS

RIGHTS AND RESPONSIBILITIES AGREEMENT BETWEEN CHAPTER 13 DEBTORS AND THEIR ATTORNEYS

(Court-Approved Retention Agreement, Revised as of 4/20/15)

Chapter 13 gives debtors important rights, such as the right to keep property that could otherwise be lost through repossession or foreclosure, but Chapter 13 also puts burdens on debtors, such as the burden of making complete and truthful disclosures of their financial situation. It is important for debtors who file a Chapter 13 bankruptcy case to understand their rights and responsibilities in bankruptcy. In this connection, the advice of an attorney is often crucial. Debtors are entitled to certain services from their attorneys, but debtors also have responsibilities to their attorneys. In order to assure that debtors and their attorneys understand their rights and responsibilities in the Chapter 13 process, the judges of the Bankruptcy Court for the Northern District of Illinois have approved this agreement, setting out the rights and responsibilities of both debtors in Chapter 13 and their attorneys, including how their attorneys will be paid for their services in the Chapter 13 case. By signing this agreement, debtors and their attorneys accept these responsibilities.

The Bankruptcy Code may require a debtor's attorney to provide the debtor with certain documents and agreements at the start of the representation. The terms of this court-approved agreement take the place of any conflicting provision in an earlier agreement. This agreement cannot be modified in any way by other agreements. Any provision of another agreement between the debtors and the attorney that conflicts with this agreement is void.

A. BEFORE THE CASE IS FILED

THE DEBTOR AGREES TO:

- 1. Discuss with the attorney the debtor's objectives in filing the case.
- 2. Provide the attorney with full, accurate and timely information, financial and otherwise, including properly documented proof of income.

THE ATTORNEY AGREES TO:

- 1. Personally counsel the debtor regarding the advisability of filing either a Chapter 13 or a Chapter 7 case, discuss both procedures (as well as non-bankruptcy options) with the debtor, and answer the debtor's questions.
- 2. Personally explain to the debtor that the attorney is being engaged to represent the debtor on all matters arising in the case, as required by Local Bankruptcy Rule, and explain how and when the attorney's fees and the trustee's fees are determined and paid.

- 3. Personally review with the debtor and sign the completed petition, plan, statements, and schedules, as well as all amendments thereto, whether filed with the petition or later. (The schedules may be initially prepared with the help of clerical or paralegal staff of the attorney's office, but personal attention of the attorney is required for the review and signing.)
- 4. Timely prepare and file the debtor's petition, plan, statements, and schedules.
- 5. Explain to the debtor how, when, and where to make all necessary payments, including both payments that must be made directly to creditors and payments that must be made to the Chapter 13 trustee, with particular attention to housing and vehicle payments.
- 6. Advise the debtor of the need to maintain appropriate insurance.

B. AFTER THE CASE IS FILED

THE DEBTOR AGREES TO:

- 1. Make the required payments to the trustee and to whatever creditors are being paid directly, or, if required payments cannot be made, to notify the attorney immediately.
- 2. Appear punctually at the meeting of creditors (also called the "341 meeting") with recent proof of income and a picture identification card. (If the identification card does not include the debtor's social security number, the debtor must also bring to the meeting a social security card.) The debtor must be present in time for check-in and when the case is called for the actual examination.
- 3. Notify the attorney of any change in the debtor's address or telephone number.
- 4. Inform the attorney of any wage garnishments or liens or levies on assets that occur or continue after the filing of the case.
- 5. Contact the attorney immediately if the debtor loses employment, has a significant change in income, or experiences any other significant change in financial situation (such as serious illness, marriage, divorce or separation, lottery winnings, or an inheritance).
- 6. Notify the attorney if the debtor is sued or wishes to file a lawsuit (including divorce.)
- 7. Inform the attorney if any tax refunds to which the debtor is entitled are seized or not received when due from the IRS or Illinois Department of Revenue.
- 8. Contact the attorney before buying, refinancing, or selling real property, and before entering into any loan agreement.
- 9. Supply the attorney with copies of all tax returns filed while the case is pending.

THE ATTORNEY AGREES TO:

1. Advise the debtor of the requirement to attend the meeting of creditors, and notify the debtor of the date, time, and place of the meeting.

- 2. Inform the debtor that the debtor must be punctual and, in the case of a joint filing, that both spouses must appear at the same meeting.
- 3. Provide knowledgeable legal representation for the debtor at the meeting of creditors (in time for check-in and the actual examination) and, unless excused by the trustee, for the confirmation hearing.
- 4. If the attorney will be employing another attorney to attend the 341 meeting or any court hearing, personally explain to the debtor in advance, the role and identity of the other attorney and provide the other attorney with the file in sufficient time to review it and properly represent the debtor.
- 5. Timely submit to the Chapter 13 trustee properly documented proof of income for the debtor, including business reports for self-employed debtors.
- 6. Timely respond to objections to plan confirmation and, where necessary, prepare, file, and serve an amended plan.
- 7. Timely prepare, file, and serve any necessary statements, amended statements, and schedules and any change of address, in accordance with information provided by the debtor.
- 8. Monitor all incoming case information (including, but not limited to, Order Confirming Plan, Notice of Intent to Pay Claims, and 6-month status reports) for accuracy and completeness. Contact the trustee promptly regarding any discrepancies.
- 9. Be available to respond to the debtor's questions throughout the term of the plan.
- 10. Prepare, file, and serve timely modifications to the plan after confirmation, when necessary, including modifications to suspend, lower, or increase plan payments.
- 11. Prepare, file, and serve necessary motions to buy or sell property and to incur debt.
- 12. Object to improper or invalid claims.
- 13. Timely respond to the Chapter 13 trustee's motions to dismiss the case, such as for payment default, or unfeasibility, and to motions to increase the percentage payment to unsecured creditors.
- 14. Timely respond to motions for relief from stay.
- 15. Prepare, file, and serve all appropriate motions to avoid liens.
- 16. Provide any other legal services necessary for the administration of the case.

C. TERMINATION OR CONVERSION OF THE CASE AFTER ENTRY OF AN ORDER APPROVING FEES AND EXPENSES

- 1. Approved fees and expenses paid under the provisions set out below are generally not refundable in the event that the case is dismissed prior to its completion, unless the dismissal is due to a failure by the attorney to comply with the duties set out in this agreement. If such a dismissal is due to a failure by the attorney, the court may order a refund of fees on motion by the debtor.
- 2. If the case is dismissed after approval of the fees and expenses but before payment of all allowed fees and expenses, the order entered by the Bankruptcy Court allowing the fees and expenses is not a judgment against the debtor for the unpaid fees and expenses based on contract law or otherwise.
- 3. If the case is converted to a case under chapter 7 after approval of the fees and expenses under this agreement but before the payment of all fees and expenses, the attorney will be entitled to an administrative claim in the chapter 7 case for any unpaid fees and expenses, pursuant to section 726(b) of the Bankruptcy Code, plus any conversion fee the attorney pays on behalf of the debtor.

D. RETAINERS AND PREVIOUS PAYMENTS

- 1. The attorney may receive a retainer or other payment before filing the case but may not receive fees directly from the debtor after the filing of the case. Unless the following provision is checked and completed, any retainer received by the attorney will be treated as a security retainer, to be placed in the attorney's client trust account until approval of a fee application by the court.
- The attorney seeks to have the retainer received by the attorney treated as an advance payment retainer, which allows the attorney to take the retainer into income immediately. The attorney hereby provides the following further information and representations:
- (a) The special purpose for the advance payment retainer and why it is advantageous to the debtor is as follows:

Client understands that any funds that client is rendering to The Semrad Law Firm, LLC as part of the advance payment retainer shall immediately become the property of The Semrad Law Firm, LLC in exchange for a commitment by The Semrad Law Firm, LLC to provide the legal services described above. Said funds will be deposited into the main bank account owned by The Semrad Law Firm, LLC and will be used for general expense of the firm. Client further understands that it is ordinarily the client's option to deposit funds with an attorney that shall remain client's property as security for future services. However, The Semrad Law Firm, LLC does not represent clients under such a security retainer because the preparation of a bankruptcy cases requires many disparate

tasks and functions for the attorney amd support staff; some of which require legal expertise while other may be only ministerial in nature. Client further understands that the benefit that client is receiving under the fee arrangement is the commitment of The Semrad Law Firm, LLC to perform any and all work reasonably necessary to represent client's interest absent any extraordinary circumstance.

- (b) The retainer will not be held in a client trust account and will become property of the attorney upon payment and will be deposited into the attorney's general account;
- (c) The retainer is a flat fee for the services to be rendered during the chapter 13 case and will be applied for such services without the need for the attorney to keep detailed hourly time records for the specific services performed for the debtor;
- (d) Any portion of the retainer that is not earned or required for expenses will be refunded to the client; and
- (e) The attorney is unwilling to represent the debtor without receiving an advanced payment retainer because of the nature of the chapter 13 case, the fact that the great majority of services for such case are performed prior to its filing, and the risks associated with the representation of debtors in bankruptcy cases in general.
- 2. In any application for compensation the attorney must disclose to the court any fees or other compensation paid by the debtor to the attorney for any reason within the one year before the case filing.

E. CONDUCT AND DISCHARGE

- 1. *Improper conduct by the attorney*. If the debtor disputes the sufficiency or quality of the legal services provided or the amount of the fees charged by the attorney, the debtor may file an objection with the court and request a hearing.
- 2. Improper conduct by the debtor. If the attorney believes that the debtor is not complying with the debtor's responsibilities under this agreement or is otherwise engaging in improper conduct, the attorney may apply for a court order allowing the attorney to withdraw from the case.
- 3. Discharge of the attorney. The debtor may discharge the attorney at any time.

F. ALLOWANCE AND PAYMENT OF ATTORNEYS' FEES AND EXPENSES

- 1. Any attorney retained to represent a debtor in a Chapter 13 case is responsible for representing the debtor on all matters arising in the case unless otherwise ordered by the court. For all of the services outlined above, the attorney will be paid a flat fee of \$ 4000.00
- 2. In addition, the debtor will pay the filing fee required in the case of \$ 310.00
- 3. Before signing this agreement, the attorney has received, \$ 400.00 toward the flat fee, leaving a balance due of \$ 3600.00 ; and \$ 61.76 for expenses, leaving a balance due for the filing fee of \$ 310.00

4. In extraordinary circumstances, such as extended evidentiary hearings or appeals, the attorney may apply to the court for additional compensation for these services. Any such application must be accompanied by an itemization of the services rendered, showing the date, the time expended, and the identity of the attorney performing the services. The debtor must be served with a copy of the application and notified of the right to appear in court to object.

| Date: | MAY 0 6 2016 | | |
|-----------|--------------|----------------------------|------|
| Signed: | J fah | - Jen | Lind |
| Debtor(s) | | Attorney for the Debtor(s) | V |

Do not sign this agreement if the amounts are blank.

| Debtor 1 Anthon ase 16- | 15617 Doc 1 Filed 05/0 | 06/16 Entered 05/06/16 17:1 entiname Page 65 of 69 | 4:37 Desc Main |
|--|--|---|---|
| | Questions for Reporting Purpos | • | |
| 16. What kind of debts do you have? | 16a. Are your debts primaril as "incurred by an individ | by consumer debts? Consumer debts and ual primarily for a personal, family, or by business debts? Business debts are ess or investment or through the operation out owe that are not consumer debts or | household purpose." e debts that you incurred to ation of the business or |
| 17. Are you filing under Chapter 7? Do you estimate that after any exempt property is excluded and administrative expenses are paid the funds will be available for distribution to unsecured creditors | Yes. I am filing under Chapter 7. I paid that funds will be availad No. No. Yes. | er 7. Go to line 18. Do you estimate that after any exempt property is able to distribute to unsecured creditors? | excluded and administrative expenses are |
| 18. How many creditors do you estimate that you owe? | | 1,000-5,000 5,001-10,000 10,001-25,000 | 25,001-50,000 50,001-100,000 More than 100,000 |
| 19. How much do you estimate your assets to be worth? | ✓ \$0-\$50,000 ☐ \$50,001-\$100,000 ☐ \$100,001-\$500,000 ☐ \$500,001-\$1 million | \$1,000,001-\$10 million \$10,000,001-\$50 million \$50,000,001-\$100 million \$100,000,001-\$500 million | \$500,000,001-\$1 billion \$1,000,000,001-\$10 billion \$10,000,000,001-\$50 billion More than \$50 billion |
| 20. How much do you estimate your liabilities to be? | ✓ \$0-\$50,000 ☐ \$50,001-\$100,000 ☐ \$100,001-\$500,000 ☐ \$500,001-\$1 million | \$1,000,001-\$10 million \$10,000,001-\$50 million \$50,000,001-\$100 million \$100,000,001-\$500 million | \$500,000,001-\$1 billion \$1,000,000,001-\$10 billion \$10,000,000,001-\$50 billion More than \$50 billion |
| Part 7: Sign Below | have examined this notition | and I dealers and a very M. C. of | |
| For you | and correct. If I have chosen to file under C or 13 of title 11, United States of proceed under Chapter 7. If no attorney represents me ar fill out this document, I have obtained in accordance with I understand making a false state connection with a bankruptcy or both. 18 U.S.C. §§ 152, 1347 | Chapter 7, I am aware that I may proceed Code. I understand the relief available and I did not pay or agree to pay some obtained and read the notice required by with the chapter of title 11, United State attement, concealing property, or obtain case can result in fines up to \$250,000, 1, 1519, and 3571. | ed, if eligible, under Chapter 7, 11,12, under each chapter, and I choose to one who is not an attorney to help me of 11 U.S.C. § 342(b). Se Code, specified in this petition. |
| | Signature of Debtor 1 Executed on5/6/2016 | Signature o | / / |
| Michigan de de la companya del companya del companya de la company | MM / DD | | MM / DD / YYYY |

Case 16-15617 Doc 1 Filed 05/06/16 Entered 05/06/16 17:14:37 Desc Main Fill in this information to identify your case: Debtor 1 Anthony LaCour First Name Middle Name Last Name Debtor 2 (Spouse, if filing) First Name Middle Name Last Name United States Bankruptcy Court for the: Northern District of Illinois (State) Case number (If known) Check if this is an Official Form 106Dec amended filing **Declaration About an Individual Debtor's Schedules** 12/15 If two married people are filing together, both are equally responsible for supplying correct information. You must file this form whenever you file bankruptcy schedules or amended schedules. Making a false statement, concealing property, or obtaining money or property by fraud in connection with a bankruptcy case can result in fines up to \$250,000, or imprisonment for up to 20 years, or both. 18 U.S.C. §§ 152, 1341, 1519, and 3571. Part 1: Sign Below Did you pay or agree to pay someone who is NOT an attorney to help you fill out bankruptcy forms? ✓ No Yes. Name of person Attach Bankruptcy Petition Preparer's Notice, Declaration, and Signature (Official Form 119), Under penalty of perjury, I declare that I have read the summary and schedules filed with this declaration and that they are true and correct. /s/ Anthony LaCour

MM/DD/YYYY

Signature of Debtor 1

MM/DD/YYYY

Date 5/6/2016

| Debtor 1 | Anthony ase 16-15617 De | oc 1 Filed 05/06/1 | L6 Entered 05/06/16 17:14:37 If Page 67 of 69 | Desc Main |
|----------|---|--------------------------------|---|-------------------------------------|
| ~ | First Name Mick | lle Name DOCUME Name | me Page 67 of 69 | |
| | thin 2 years before you filed for bank ditors, or other parties. | ruptcy, did you give a financ | cial statement to anyone about your business? | Include all financial institutions, |
| Y | No Yes. Fill in the details below. | | | |
| | | Date issu | ed | |
| | Name | MM/DD/YY | YY | |
| | Number Street | | | |
| | City State | Zip Code | | |
| Part 12: | Sign Below | | | |
| and | correct. I understand that making a f | false statement, concealing | ny attachments, and I declare under penalty of p property, or obtaining money or property by fra or up to 20 years, or both. 18 U.S.C. §§ 152, 1341 | ud in connection with a |
| | Date 5/6/2016 | | Date / | |
| Did | you attach additional pages to Your | Statement of Financial Affai | rs for Individuals Filing for Bankruptcy (Officia | l Form 107)? |
| V | No | | | · |
| | Yes | | | |
| nia. | | | | |
| Dia | you pay or agree to pay someone wh | o is not an attorney to help | you fill out bankruptcy forms? | |
| ☑ | No | o is not an attorney to help y | you fill out bankruptcy forms? | |
| | | o is not an attorney to help y | you fill out bankruptcy forms? Attach the Bankruptcy Petitio Declaration, and Signature (| • |

Case 16-15617 Doc 1 Filed 05/06/16 Entered 05/06/16 17:14:37 Desc Main UNIPED STATES BANKRUPTET COURT Northern District of Illinois

| In re: | LaCour, Anthony | Case No |
|--------|---|---|
| | Debtor(s) | |
| | | Chapter. Chapter13 |
| VE | VERIFIC | ATION OF CREDITOR MATRIX |
| | The above named Debtors hereby verify that th | at the attached list of creditors is true and correct to the best of their knowledge. |
| Date: | 5/6/2016 | /s/ LaCour, Anthony LaCour, Anthony LaCour, Anthony |

| Deb | tor 1 | Anthony First Name Anthony A | |
|--------------|---------------------------------|--|---|
| 16. | Calc | culate the median family income that applies to you. Follow these steps: | tot brillianna linnida annomine dada na membada en en anno anterna, billing ang |
| | 16a. | Fill in the state in which you live. | |
| | 16b. | Fill in the number of people in your household. | |
| | 16c. | Fill in the median family income for your state and size of household To find a list of applicable median income amounts, go online using the link specified in the separate instructions for this form. This list may also be available at the bankruptcy clerk's office. | \$49,741.00 |
| 17. | How | v do the lines compare? | |
| | 17a. | Line 15b is less than or equal to line 16c. On the top of page 1 of this form, check box 1, Disposable income is not determined under 11 U.S.C. § 1325(b)(3). Go to Part 3. Do NOT fill out Calculation of Disposable Income (Official Form 122C-2). | |
| | 17b. | Line 15b is more than line 16c. On the top of page 1 of this form, check box 2, <i>Disposable income is determined under 11 U.S.C.</i> § 1325(b)(3). Go to Part 3 and fill out Calculation of Disposable Income (Official Form 122C-2). On line 39 of that form, copy your current monthly income from line 14 above. | |
| art | 3: (| Calculate Your Commitment Period Under 11 U.S.C. §1325(b)(4) | |
| 18. | Сор | y your total average monthly income from line 11. | \$882.16 |
| 19. | Ded com | uct the marital adjustment if it applies. If you are married, your spouse is not filing with you, and you contend that calculating the mitment period under 11 U.S.C. § 1325(b)(4) allows you to deduct part of your spouse's income, copy the amount from line 13. | |
| | 19a. | If the marital adjustment does not apply, fill in 0 on line 19a. | -\$0.00 |
| | 19b. | Subtract line 19a from line 18. | \$882.16 |
| 20. | Calc | culate your current monthly income for the year. Follow these steps: | |
| | 20a. | Copy line 19b. | \$882.16 |
| | | Multiply by 12 (the number of months in a year). | x 12 |
| | 20b. | The result is your current monthly income for the year for this part of the form. | \$10,585.92 |
| | 20c. | Copy the median family income for your state and size of household from line 16c. | \$49,741.00 |
| 21. | How | do the lines compare? | |
| | | Line 20b is less than line 20c. Unless otherwise ordered by the court, on the top of page 1 of this form, check box 3, The commitment period is 3 years. Go to Part 4. | |
| | | Line 20b is more than or equal to line 20c. Unless otherwise ordered by the court, on the top of page 1 of this form, check box 4, <i>The commitment period is 5 years</i> . Go to Part 4. | |
| art | 4: 8 | Sign Below | |
| | | By signing here, I declare under penalty of perjury that the information on this statement and in any attachments is true and correct. | |
| | | ★ /s/ Anthony LaCour Signature of Debtor 1 Signature of Debtor 2 | |
| | | Signature of Debtor 1 Signature of Debtor 2 | |
| | | Date 5/6/2016 Date MM/DD/YYYY | |
| of Francisco | T's Printeriorial limited Asia. | If you checked 17a, do NOT fill out or file Form 122C-2. If you checked 17b, fill out Form 122C-2 and file it with this form. On line 39 of that form, copy your current monthly income from line 14 above. | |
| | | | |